

1  
2 UNITED STATES DISTRICT COURT  
3 EASTERN DISTRICT OF NEW YORK

4 - - - - -  
5 ADRIAN SCHOOLCRAFT,

6 Plaintiff,

7 -against- Index No.

8 10CIV-6005 (RWS)

9 THE CITY OF NEW YORK, DEPUTY CHIEF  
10 MICHAEL MARINO, Tax Id. 873220,  
Individually and in his Official  
11 Capacity, ASSISTANT CHIEF PATROL  
BOROUGH BROOKLYN NORTH GERALD NELSON,  
12 Tax Id. 912370, Individually and in his  
Official Capacity, DEPUTY INSPECTOR  
STEVEN MAURIELLO, Tax Id. 895117,  
13 Individually and in his Official  
Capacity, CAPTAIN THEODORE LAUTERBORN,  
Tax Id. 897840, Individually and in his  
14 Official Capacity, LIEUTENANT JOSEPH  
GOFF, Tax Id. 894025, Individually and  
15 in his Official Capacity, stg. Frederick  
Sawyer, Shield No. 2576, Individually  
16 and in his Official Capacity, SERGEANT  
KURT DUNCAN, Shield No. 2483,  
17 Individually and in his Official  
Capacity, LIEUTENANT TIMOTHY CAUGHEY,  
18 Tax Id. 885374, Individually and in his  
Official Capacity, SERGEANT SHANTEL  
19 JAMES, Shield No. 3004, and P.O.'s "JOHN  
DOE" 1-50, Individually and in their  
20 Official Capacity (the name John Doe  
being fictitious, as the true names are  
21 presently unknown) (collectively referred  
to as "NYPD defendants"), JAMAICA  
22 HOSPITAL MEDICAL CENTER, DR. ISAK ISAKOV,  
Individually and in his Official  
23 Capacity, DR. LILIAN ALDANA-BERNIER,  
Individually and in her Official Capacity  
24 and JAMAICA HOSPITAL MEDICAL CENTER  
EMPLOYEES "JOHN DOE" # 1-50, Individually

25 (Continued)

<p style="text-align: right;">Page 2</p> <p>1 2 and in their Official Capacity (the name 3 John Doe being fictitious, as the true 4 names are presently unknown), 5 6 Defendants. 7 8 -----X 9 10 111 Broadway 11 New York, New York 12 February 11, 2014 13 10:30 a.m. 14 15 VIDEOTAPED DEPOSITION of DR. LILIAN 16 ALDANA-BERNIER, one of the Defendants in 17 the above-entitled action, held at the 18 above time and place, taken before 19 Margaret Scully-Ayers, a Shorthand 20 Reporter and Notary Public of the State 21 of New York, pursuant to the Federal 22 Rules of Civil Procedure. 23 24 * * * 25</p>	<p style="text-align: right;">Page 4</p> <p>1 2 APPEARANCES CONTINUED 3 4 SCOPETTA, SEIFF, KRETZ &amp; ABERCROMBIE, 5 ESQS. 6 Attorneys for Defendant 7 STEVEN MAURIELLO 8 444 Madison Avenue 9 30th Floor 10 New York, New York 10022 11 12 BY: WALTER A. KRETZ, JR., ESQ. 13 14 15 MARTIN, CLEARWATER &amp; BELL, LLP 16 Attorneys for Defendant 17 JAMAICA HOSPITAL MEDICAL CENTER 18 220 42nd Street 19 13th Floor 20 New York, New York 10017 21 22 BY: GREG RADOMISLI, ESQ. 23 File # 667-82153 24 25 26 27 IVONE, DEVINE &amp; JENSEN, LLP 28 Attorneys for Defendant 29 DR. ISAK ISAKOV 30 2001 Marcus Avenue 31 Suite N100 32 Lake Success, New York 11042 33 BY: BRIAN E. LEE, ESQ. 34 35 (Appearances continued on next page.) 36 37 38 39 40</p>
<p style="text-align: right;">Page 3</p> <p>1 2 APPEARANCES: 3 4 NATHANIEL SMITH, ESQ. 5 Attorney for Plaintiff 6 111 Broadway 7 New York, New York 10006 8 9 JOHN LENOIR, ESQ. 10 Attorney for Plaintiff 11 829 Third Street NE 12 Washington, DC 20002 13 14 15 SUCKLE SCHLESINGER PLLC 16 Attorneys for Plaintiff 17 224 West 35th Street 18 Suite 1200 19 New York, New York 10001 20 21 BY: HOWARD SUCKLE, ESQ. 22 23 24 25 ZACHARY W. CARTER, ESQ. 26 Corporation Counsel 27 Attorneys for Defendant 28 THE CITY OF NEW YORK 29 100 Church Street 30 New York, New York 10007 31 BY: RYAN SHAFFER, ESQ. 32 File # 2010-033074 33 34 35 (Appearances continued on next page.) 36 37 38 39 40</p>	<p style="text-align: right;">Page 5</p> <p>1 2 APPEARANCES CONTINUED 3 4 CALLAN, KOSTER, BRADY &amp; BRENNAN, LLP 5 Attorneys for Defendant 6 LILIAN ALDANA-BERNIER 7 One Whitehall Street 8 New York, New York 10004 9 BY: PAUL CALLAN, ESQ. 10 File # 090.155440 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 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<p style="text-align: right;">Page 6</p> <p>1</p> <p>2 STIPULATIONS</p> <p>3 IT IS HEREBY STIPULATED AND AGREED, by</p> <p>4 and among counsel for the respective</p> <p>5 parties hereto, that the filing, sealing</p> <p>6 and certification of the within</p> <p>7 deposition shall be and the same are</p> <p>8 hereby waived;</p> <p>9 IT IS FURTHER STIPULATED AND AGREED</p> <p>10 that all objections, except as to form of</p> <p>11 the question, shall be reserved to the</p> <p>12 time of the trial;</p> <p>13 IT IS FURTHER STIPULATED AND AGREED</p> <p>14 that the within deposition may be signed</p> <p>15 before any Notary Public with the same</p> <p>16 force and effect as if signed and sworn</p> <p>17 to before the Court.</p> <p>18</p> <p>19 * * *</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>	<p style="text-align: right;">Page 8</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Good morning, Doctor. My name</p> <p>3 is Howard Suckle. I represent Mr.</p> <p>4 Schoolcraft in this matter, and I'll be</p> <p>5 asking you some questions today.</p> <p>6 Although I'm sure your attorney</p> <p>7 has gone over some basic rules of a</p> <p>8 deposition, let me just make sure we are</p> <p>9 all are clear on them.</p> <p>10 If at any time you don't</p> <p>11 understand my question for any reason</p> <p>12 whatsoever, please let me know because if</p> <p>13 you do answer we are going to assume that</p> <p>14 you understood the question. Okay?</p> <p>15 A. Okay.</p> <p>16 Q. In addition while sometimes</p> <p>17 during the course of a conversation, a</p> <p>18 shake of the head or a nod may be an</p> <p>19 appropriate answer when the answer is yes</p> <p>20 or no. Here we have a court reporter and</p> <p>21 the court reporter needs to take down</p> <p>22 everything that you say, everything I</p> <p>23 say, and anything else said in the room.</p> <p>24 If the answer is appropriately</p> <p>25 yes or no, can you please use some type</p>
<p style="text-align: right;">Page 7</p> <p>1</p> <p>2 MR. SMITH: On the record at</p> <p>3 10:29. We are starting the deposition</p> <p>4 of Dr. Lilian --</p> <p>5 MR. CALLAN: Aldana,</p> <p>6 A-L-D-A-N-A, Bernier.</p> <p>7 MR. SMITH: Aldana-Bernier.</p> <p>8 The deposition is being</p> <p>9 videotaped.</p> <p>10 We are at 111 Broadway, my</p> <p>11 office, Nathaniel Smith, and today is</p> <p>12 the 11th of February 2014.</p> <p>13 You can swear the Witness in.</p> <p>14 L I L I A N A L D A N A -</p> <p>15 B E R N I E R, the Witness herein, having</p> <p>16 first been duly sworn by the Notary Public,</p> <p>17 was examined and testified as follows:</p> <p>18 EXAMINATION BY MR. SUCKLE:</p> <p>19 Q. What is your name?</p> <p>20 A. Lilian Aldana, hyphen, Bernier;</p> <p>21 L-I-L-I-A-N, A-L-D-A-N-A, hyphen,</p> <p>22 B-E-R-N-I-E-R.</p> <p>23 Q. Where do you reside?</p> <p>24 A. 71 Parker Avenue, Maplewood,</p> <p>25 New Jersey 07042.</p>	<p style="text-align: right;">Page 9</p> <p>1 L. ALDANA-BERNIER</p> <p>2 of word, say yes or no, opposed to</p> <p>3 shaking your head?</p> <p>4 A. Yes.</p> <p>5 Q. Also in that vein, the reporter</p> <p>6 needs to take down everything that you</p> <p>7 and I say. Although you may anticipate</p> <p>8 what my question is going to be before I</p> <p>9 finish, please let me finish it so the</p> <p>10 reporter can take that down and then</p> <p>11 begin to answer. Okay?</p> <p>12 A. Yes.</p> <p>13 Q. Doctor, can you tell me what</p> <p>14 you presently do for a living?</p> <p>15 A. I am a medical doctor,</p> <p>16 psychiatrist specialty.</p> <p>17 Q. Where are you employed, if at</p> <p>18 all?</p> <p>19 A. I am. I'm working for Jamaica</p> <p>20 Hospital.</p> <p>21 Q. When you say you work for</p> <p>22 Jamaica Hospital, is that your employer?</p> <p>23 A. Yes.</p> <p>24 Q. How long have you been employed</p> <p>25 by Jamaica Hospital?</p>

3 (Pages 6 - 9)

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<p style="text-align: right;">Page 10</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. From 1995 to the present.</p> <p>3 Q. I don't want to know the</p> <p>4 details, but you are paid a salary,</p> <p>5 correct?</p> <p>6 A. Yes.</p> <p>7 Q. By Jamaica Hospital?</p> <p>8 A. Yes.</p> <p>9 Q. In other words when you see</p> <p>10 patients, you don't bill them</p> <p>11 independently, do you?</p> <p>12 A. No, I don't.</p> <p>13 Q. Doctor, can you tell me where</p> <p>14 did you go to undergraduate school?</p> <p>15 A. I went to the Concordia</p> <p>16 College. That is for my BSN in the</p> <p>17 Philippines.</p> <p>18 Q. Are you originally from the</p> <p>19 Philippines?</p> <p>20 A. I am from the Philippines, yes.</p> <p>21 Q. That's where you were born?</p> <p>22 A. Yes.</p> <p>23 Q. What did you study at Concordia</p> <p>24 College?</p> <p>25 A. That's bachelor's of science in</p>	<p style="text-align: right;">Page 12</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. So you have a master's in</p> <p>3 nursing?</p> <p>4 A. Yes.</p> <p>5 Q. And education?</p> <p>6 A. Yes.</p> <p>7 Q. After you completed your</p> <p>8 master's in nursing and in education,</p> <p>9 what did you do next with regard to your</p> <p>10 career and education?</p> <p>11 A. After that I went to medical</p> <p>12 school from 1981 to 1986, University of</p> <p>13 Santiago, Dominican Republic.</p> <p>14 Q. At some point you immigrated to</p> <p>15 the Dominican Republic?</p> <p>16 A. Yes.</p> <p>17 Q. Did you become a citizen of the</p> <p>18 Dominican Republic?</p> <p>19 A. No, I was a citizen of the</p> <p>20 United States before I went there.</p> <p>21 Q. Just for the record, when did</p> <p>22 you become a citizen?</p> <p>23 A. That was between '78 and '79.</p> <p>24 Q. While you were in medical</p> <p>25 school, did you concentrate on any</p>
<p style="text-align: right;">Page 11</p> <p>1 L. ALDANA-BERNIER</p> <p>2 nursing.</p> <p>3 MR. SMITH: Sorry. What was</p> <p>4 that bachelor's in?</p> <p>5 THE WITNESS: In nursing.</p> <p>6 Q. When did you complete that?</p> <p>7 A. This was in 1973.</p> <p>8 Q. After you completed your</p> <p>9 bachelor's in nursing, what did you do</p> <p>10 with regards to your career or education?</p> <p>11 A. When I finished in March, I</p> <p>12 work in the emergency room voluntarily</p> <p>13 for the Far Eastern University.</p> <p>14 Q. How long did you do that?</p> <p>15 A. From March to November when I</p> <p>16 came to the United States in 1973.</p> <p>17 Q. When you came to the United</p> <p>18 States, for what purpose did you come to</p> <p>19 the United States?</p> <p>20 A. The American dream.</p> <p>21 Q. Did you continue your education</p> <p>22 or your career at that point?</p> <p>23 A. Yes, 1976 to '97 I took my</p> <p>24 master's in nursing, minor in education</p> <p>25 at the New York University.</p>	<p style="text-align: right;">Page 13</p> <p>1 L. ALDANA-BERNIER</p> <p>2 particular area of medicine?</p> <p>3 A. At that point in medical</p> <p>4 school, no.</p> <p>5 Q. Did you graduate from the</p> <p>6 University of Santiago?</p> <p>7 A. Yes.</p> <p>8 Q. What was your degree?</p> <p>9 A. MD.</p> <p>10 Q. What did you do next after that</p> <p>11 with regard to your career or education?</p> <p>12 A. In 1986 I had my externship at</p> <p>13 the Elizabeth General Hospital in</p> <p>14 psychiatry.</p> <p>15 Q. Where is that?</p> <p>16 A. In New Jersey.</p> <p>17 Q. How long did you do that?</p> <p>18 A. For a year.</p> <p>19 Q. After that what did you do next</p> <p>20 with regard to your career or education?</p> <p>21 A. From '89 to '93, I had my</p> <p>22 residency in psychiatry at the</p> <p>23 Metropolitan Hospital here in Manhattan.</p> <p>24 Q. As a resident did you have to</p> <p>25 rotate through other disciplines as well</p>

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<p style="text-align: right;">Page 14</p> <p>1 L. ALDANA-BERNIER</p> <p>2 as psychiatry?</p> <p>3 A. Yes, we did internal medicine,</p> <p>4 urology.</p> <p>5 Q. Any other disciplines you</p> <p>6 rotated through?</p> <p>7 A. I choose my elective in</p> <p>8 endocrine.</p> <p>9 Q. What is endocrine?</p> <p>10 A. Endocrine has to do with your</p> <p>11 hormones.</p> <p>12 Q. Did you complete that</p> <p>13 residency?</p> <p>14 A. I did in 1993.</p> <p>15 Q. After your residency what did</p> <p>16 you do next with regard to your career or</p> <p>17 education?</p> <p>18 A. After 1993 I had -- 1994 I work</p> <p>19 at Kings County Hospital as an inpatient</p> <p>20 doctor.</p> <p>21 Q. When you say "inpatient</p> <p>22 doctor," what do you mean?</p> <p>23 A. Inpatient unit.</p> <p>24 Q. In psychiatry?</p> <p>25 A. Psychiatry inpatient unit.</p>	<p style="text-align: right;">Page 16</p> <p>1 L. ALDANA-BERNIER</p> <p>2 nine months.</p> <p>3 Q. While you were doing your</p> <p>4 residency at Metropolitan, is that a City</p> <p>5 hospital?</p> <p>6 A. It's a City hospital.</p> <p>7 Q. While you were there, were you</p> <p>8 paid any money or given any stipend?</p> <p>9 A. Paid a salary.</p> <p>10 Q. So you were an employee at that</p> <p>11 point too of the City of New York,</p> <p>12 correct?</p> <p>13 A. Yes.</p> <p>14 Q. How long were you an employee</p> <p>15 of Metropolitan?</p> <p>16 A. Four years.</p> <p>17 Q. After the inpatient attending</p> <p>18 at Kings County Hospital, what did you do</p> <p>19 next?</p> <p>20 A. I went to Coney Island</p> <p>21 emergency room.</p> <p>22 Q. What did you do there?</p> <p>23 A. Emergency room attending.</p> <p>24 Q. Psychiatric?</p> <p>25 A. Psychiatric emergency room.</p>
<p style="text-align: right;">Page 15</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. As an attending?</p> <p>3 A. Attending.</p> <p>4 Q. You were employed by Kings</p> <p>5 County Hospital?</p> <p>6 A. Kings County Hospital.</p> <p>7 Q. That's a hospital run by the</p> <p>8 City of New York?</p> <p>9 A. Yes, Brooklyn.</p> <p>10 Q. You were an employee of the</p> <p>11 City of New York at that time?</p> <p>12 A. Yes.</p> <p>13 Q. We're early on now, and it's</p> <p>14 okay, but if we keep running over each</p> <p>15 and you're not letting me finish before</p> <p>16 you answer, she is going to start hitting</p> <p>17 me.</p> <p>18 You have to let me finish</p> <p>19 before you answer. Okay?</p> <p>20 A. Okay.</p> <p>21 Q. How long were you an employee</p> <p>22 of the City of New York?</p> <p>23 A. Can I count?</p> <p>24 Q. Take your time.</p> <p>25 A. I'm not sure. Between eight to</p>	<p style="text-align: right;">Page 17</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Is Coney Island Hospital a City</p> <p>3 hospital?</p> <p>4 A. City hospital.</p> <p>5 Q. How long did you work as an</p> <p>6 attending at the Coney Island Hospital</p> <p>7 for the City of New York?</p> <p>8 A. At the time maybe three months.</p> <p>9 Q. When you went from Kings to</p> <p>10 Coney Island Hospital, was this a</p> <p>11 transfer; did you leave one job and start</p> <p>12 a new job?</p> <p>13 A. I left one job to start a new</p> <p>14 job.</p> <p>15 Q. After what year was it that you</p> <p>16 worked at Coney Island Hospital?</p> <p>17 A. That was 1995.</p> <p>18 Q. After Coney Island Hospital,</p> <p>19 what did you do next?</p> <p>20 A. I went to Jamaica Hospital.</p> <p>21 Q. So you went to Jamaica Hospital</p> <p>22 in 1995?</p> <p>23 A. '95.</p> <p>24 Q. And you have been employed</p> <p>25 there ever since?</p>

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<p style="text-align: right;">Page 18</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. Yes.</p> <p>3 Q. When you first got to Jamaica</p> <p>4 Hospital, what was your position?</p> <p>5 A. I was working in the emergency</p> <p>6 room as an attending psychiatrist.</p> <p>7 Q. And has that position changed</p> <p>8 at all, have you changed your position at</p> <p>9 Jamaica Hospital?</p> <p>10 A. As an attending? I'm still an</p> <p>11 attending.</p> <p>12 Q. You are still in the same</p> <p>13 position as in 1995?</p> <p>14 A. I'm an attending still in</p> <p>15 Jamaica Hospital.</p> <p>16 Q. Were you anything other than an</p> <p>17 attending at Jamaica Hospital?</p> <p>18 A. I was director of the emergency</p> <p>19 room.</p> <p>20 Q. When were you the director of</p> <p>21 the emergency room?</p> <p>22 A. I am not sure. I don't</p> <p>23 remember when, but I was acting director</p> <p>24 and became the director. Then I was</p> <p>25 still an attending at Jamaica Hospital.</p>	<p style="text-align: right;">Page 20</p> <p>1 L. ALDANA-BERNIER</p> <p>2 rather have somebody in there than take</p> <p>3 somebody from outside.</p> <p>4 Q. When was the last time you were</p> <p>5 in the role of director of the</p> <p>6 psychiatric emergency room at Jamaica</p> <p>7 Hospital?</p> <p>8 A. That was October 2013.</p> <p>9 Q. So in October 2009, you were</p> <p>10 the director of the psychiatric emergency</p> <p>11 room?</p> <p>12 A. Yes.</p> <p>13 Q. As a director of the</p> <p>14 psychiatric emergency room in October</p> <p>15 2009, what were your responsibilities and</p> <p>16 functions?</p> <p>17 A. Director of emergency room, you</p> <p>18 do have administrative responsibility.</p> <p>19 You attend administrative meeting. At</p> <p>20 the same time, you were still do</p> <p>21 clinicals, you still have the clinical</p> <p>22 aspect. You have to see the patients.</p> <p>23 At the same time, you have to oversee the</p> <p>24 residents and the other staff of the</p> <p>25 emergency room.</p>
<p style="text-align: right;">Page 19</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. How many months or years were</p> <p>3 you the acting director?</p> <p>4 A. How many years?</p> <p>5 Q. How long?</p> <p>6 A. Like -- I have no recollection.</p> <p>7 Q. Was it a year, two years, six</p> <p>8 months, ten years? Give me an idea.</p> <p>9 A. As acting, approximately one</p> <p>10 year.</p> <p>11 Q. How about as director?</p> <p>12 A. Director, maybe ten years.</p> <p>13 Q. While you were the acting</p> <p>14 director and director, were you actually</p> <p>15 practicing medicine during that period of</p> <p>16 time?</p> <p>17 A. Yes.</p> <p>18 Q. Well, was there any difference</p> <p>19 in the job function as acting director or</p> <p>20 director?</p> <p>21 A. No. They were trying to find</p> <p>22 something so you are just the acting</p> <p>23 until they find a real director.</p> <p>24 Q. And they found you?</p> <p>25 A. Yeah, I have been there. They</p>	<p style="text-align: right;">Page 21</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. As the director of the</p> <p>3 emergency room, did you have any role in</p> <p>4 creating or drafting any of the rules or</p> <p>5 regulations of Jamaica Hospital emergency</p> <p>6 room?</p> <p>7 A. Together with the other members</p> <p>8 of the team or other administrators, yes,</p> <p>9 I sit down with them and give my</p> <p>10 feedback.</p> <p>11 Q. How much of your job in October</p> <p>12 2009 as director involved administrative</p> <p>13 work versus clinical work?</p> <p>14 A. I do more clinical.</p> <p>15 Q. You say more clinical?</p> <p>16 A. More clinical, yes.</p> <p>17 Q. Give me an idea how much of</p> <p>18 your day or week was spent doing</p> <p>19 administrative work versus clinical work?</p> <p>20 A. I do more clinical, but I was</p> <p>21 the only psychiatrist in the emergency</p> <p>22 room until -- go ahead?</p> <p>23 Q. Until when?</p> <p>24 A. Until they had given me a new</p> <p>25 attending which was for only one year.</p>

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<p style="text-align: right;">Page 22</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. When was that?</p> <p>3 A. In 2012/2013.</p> <p>4 Q. So October 2009 you were the</p> <p>5 only attending psychiatric physician in</p> <p>6 the psychiatric emergency room?</p> <p>7 A. Yes.</p> <p>8 Q. And did you have a set schedule</p> <p>9 at the time during the day that you</p> <p>10 worked?</p> <p>11 A. I go to work from eight</p> <p>12 o'clock.</p> <p>13 Q. Until when?</p> <p>14 A. That depends, until finishing</p> <p>15 my patient. I cannot stay because</p> <p>16 sometimes you work overtime, six o'clock,</p> <p>17 seven o'clock.</p> <p>18 Q. What is the standard day?</p> <p>19 A. Eight to four.</p> <p>20 I want you to know, I don't</p> <p>21 stay until four o'clock. I stay more</p> <p>22 than that.</p> <p>23 Q. That's what I'm trying to find</p> <p>24 out.</p> <p>25 On an average day, if there is</p>	<p style="text-align: right;">Page 24</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. In addition to having been the</p> <p>3 only psychiatric physician employed at</p> <p>4 the emergency room in October 2009, were</p> <p>5 there other physicians who had privileges</p> <p>6 in the emergency room; psychiatric I'm</p> <p>7 talking about?</p> <p>8 A. Yes.</p> <p>9 Q. And how did that work, what</p> <p>10 kind of association did other doctors</p> <p>11 have with the psychiatric emergency room</p> <p>12 that you are aware of?</p> <p>13 A. We divided in shifts. One you</p> <p>14 have that works from four to 12 and one</p> <p>15 that work from 12 to eight.</p> <p>16 Q. When you say "one that works,"</p> <p>17 since you were the only one employed,</p> <p>18 what was the title of the people that</p> <p>19 worked for the other two shifts?</p> <p>20 A. Also psychiatrists.</p> <p>21 Q. Were they employed by Jamaica</p> <p>22 Hospital?</p> <p>23 A. Yes.</p> <p>24 Q. And that was in October 2009?</p> <p>25 A. Yes.</p>
<p style="text-align: right;">Page 23</p> <p>1 L. ALDANA-BERNIER</p> <p>2 such a thing, how long do you stay at the</p> <p>3 hospital?</p> <p>4 A. Maybe ten, 12 hours.</p> <p>5 Q. When I talked about</p> <p>6 administrative responsibilities, to</p> <p>7 oversee the residents, was that part of</p> <p>8 that administrative responsibility, is</p> <p>9 that clinical, or something else?</p> <p>10 A. That's more of your teaching</p> <p>11 responsibilities.</p> <p>12 Q. How about overseeing the staff,</p> <p>13 is that in addition to your</p> <p>14 administrative responsibilities?</p> <p>15 A. Yes.</p> <p>16 Q. How much of your time was</p> <p>17 devoted to doing clinical compared to all</p> <p>18 of these other functions that you had as</p> <p>19 director?</p> <p>20 A. I spend maybe out of the ten</p> <p>21 hours, I spend eight hours clinical.</p> <p>22 Q. When you say "overseeing</p> <p>23 staff," is that the nursing staff or</p> <p>24 something else?</p> <p>25 A. Yes, nursing staff.</p>	<p style="text-align: right;">Page 25</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Let me just clarify: I thought</p> <p>3 you said you were the only psychiatrist</p> <p>4 working in the emergency room in October</p> <p>5 2009. Are you saying these other</p> <p>6 psychiatrists were residents?</p> <p>7 A. I'm referring to the time you</p> <p>8 were asking. The time I work from eight</p> <p>9 to four, I am the only psychiatrist.</p> <p>10 Q. So during your shift?</p> <p>11 A. During my shift.</p> <p>12 Q. In October 2009 who were the</p> <p>13 other psychiatrists employed by Jamaica</p> <p>14 Hospital that you are aware of in the</p> <p>15 emergency room?</p> <p>16 MR. RADOMISLI: Objection to</p> <p>17 form.</p> <p>18 A. When you saying other</p> <p>19 psychiatrists, include the residents?</p> <p>20 Q. Let's not talk about residents</p> <p>21 yet. The other attendings.</p> <p>22 A. Who are the other?</p> <p>23 Q. Yes, who are the other</p> <p>24 physicians that man those other shifts?</p> <p>25 A. I will not remember who those</p>

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<p style="text-align: right;">Page 26</p> <p>1 L. ALDANA-BERNIER</p> <p>2 psychiatrist were.</p> <p>3 MR. SMITH: What was the answer?</p> <p>4 MR. CALLAN: She doesn't</p> <p>5 remember.</p> <p>6 [The requested portion of the</p> <p>7 record was read.]</p> <p>8 Q. And working at Metropolitan,</p> <p>9 Kings County Hospital, Coney Island</p> <p>10 Hospital up until your job working with</p> <p>11 Jamaica Hospital, did you ever encounter</p> <p>12 patients brought in by police officers to</p> <p>13 the emergency psychiatric unit?</p> <p>14 A. Did I ever encounter?</p> <p>15 Q. Yes.</p> <p>16 A. In all of the hospitals that I</p> <p>17 worked?</p> <p>18 Q. Yes.</p> <p>19 A. Yes.</p> <p>20 Q. From October 2009 back into</p> <p>21 your career, how many times did you</p> <p>22 encounter patients who had been brought</p> <p>23 to the psychiatric emergency room by</p> <p>24 police officers?</p> <p>25 A. I will not remember.</p>	<p style="text-align: right;">Page 28</p> <p>1 L. ALDANA-BERNIER</p> <p>2 understanding it's an estimate, do you</p> <p>3 recall any of those patients being</p> <p>4 brought in in handcuffs?</p> <p>5 A. Okay. How do you want me to</p> <p>6 answer that?</p> <p>7 Q. Yes or no.</p> <p>8 Do you remember anybody, any of</p> <p>9 those ten or so people, being brought in</p> <p>10 in handcuffs?</p> <p>11 A. They were -- any time an</p> <p>12 officer bring a patient, they are in</p> <p>13 handcuffs.</p> <p>14 Q. Every single time that you</p> <p>15 encountered officers bringing patients to</p> <p>16 the hospital, they are in handcuffs in</p> <p>17 your history?</p> <p>18 A. When an officer brings a</p> <p>19 patient to the emergency room, they</p> <p>20 usually are in handcuffs.</p> <p>21 Q. And they are usually under</p> <p>22 arrest?</p> <p>23 A. Not all are under arrest.</p> <p>24 Q. When you say "they are not all</p> <p>25 under arrest," what do you mean?</p>
<p style="text-align: right;">Page 27</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Hundreds of people, thousands</p> <p>3 of people?</p> <p>4 A. Not hundreds.</p> <p>5 Q. How often in your career have</p> <p>6 you encountered patients brought to the</p> <p>7 psychiatric emergency room by police</p> <p>8 officers?</p> <p>9 A. Repeat that question.</p> <p>10 Q. Sure.</p> <p>11 In your career how many times</p> <p>12 have you encountered patients being</p> <p>13 brought to the emergency room by police</p> <p>14 officers?</p> <p>15 A. I think I answered you. I will</p> <p>16 say I cannot remember.</p> <p>17 Q. Can you give me an estimate</p> <p>18 what kind of number we are talking about:</p> <p>19 ten times, five times, a hundred times?</p> <p>20 A. Well, I will be deceiving you</p> <p>21 if I told you a number, right?</p> <p>22 Q. Can you give your best</p> <p>23 estimate?</p> <p>24 A. Maybe ten.</p> <p>25 Q. In those ten or so times,</p>	<p style="text-align: right;">Page 29</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. When they bring in a patient</p> <p>3 very agitated, combative, violent,</p> <p>4 depending on the nature of their call,</p> <p>5 I'm sure they were being brought by</p> <p>6 handcuffs.</p> <p>7 Q. And do you recall as you sit</p> <p>8 here any of names of any of those</p> <p>9 patients?</p> <p>10 A. No.</p> <p>11 Q. And do you recall as you sit</p> <p>12 here a gentleman named Adrian Schoolcraft</p> <p>13 from only your memory?</p> <p>14 A. Hold on. You're saying from my</p> <p>15 memory?</p> <p>16 Q. Yes.</p> <p>17 A. Because I have been reading the</p> <p>18 chart.</p> <p>19 Q. Independent of the records, do</p> <p>20 you have any memory of Adrian</p> <p>21 Schoolcraft?</p> <p>22 MR. CALLAN: Objection to the</p> <p>23 form of the question.</p> <p>24 You can answer.</p> <p>25 A. No, I don't.</p>

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<p style="text-align: right;">Page 30</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Okay. Can't describe him</p> <p>3 physically, can you?</p> <p>4 A. No.</p> <p>5 Q. So am I correct that your</p> <p>6 entire memory of any care or treatment</p> <p>7 you may have rendered to Mr. Schoolcraft</p> <p>8 is contained in the hospital chart of</p> <p>9 Jamaica Hospital?</p> <p>10 MR. RADOMISLI: Objection to</p> <p>11 form.</p> <p>12 MR. CALLAN: I join in the</p> <p>13 objection.</p> <p>14 You can answer.</p> <p>15 A. From it, yes.</p> <p>16 Q. So your memory of care and</p> <p>17 treatment of Mr. Schoolcraft comes from</p> <p>18 the notes contained in the hospital chart</p> <p>19 of Jamaica Hospital, correct?</p> <p>20 A. Yes.</p> <p>21 Q. And prior to coming here today,</p> <p>22 did you review any documents?</p> <p>23 A. The same, yes.</p> <p>24 Q. What did you review?</p> <p>25 A. The records [indicating].</p>	<p style="text-align: right;">Page 32</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. Not my consult, a consult done</p> <p>3 by the resident in the medical ER and the</p> <p>4 notes of the resident when the patient</p> <p>5 was in our psych unit.</p> <p>6 Q. The consult of the resident,</p> <p>7 was that a psych ER consult?</p> <p>8 A. It was a psychiatric consult in</p> <p>9 the medical ER.</p> <p>10 Q. And then you looked at notes</p> <p>11 from the psych ER?</p> <p>12 A. From the psych ER.</p> <p>13 Q. Were any of those your notes?</p> <p>14 A. The notes of the residence.</p> <p>15 Q. Prior to coming here today and</p> <p>16 since October 2009, have you ever looked</p> <p>17 at any notes that you made in the chart?</p> <p>18 A. No.</p> <p>19 Q. So in anticipation of coming</p> <p>20 here today before you came to this room,</p> <p>21 did you look at any documents before</p> <p>22 today?</p> <p>23 A. Yes, same notes.</p> <p>24 Q. Same notes.</p> <p>25 In that entire time from</p>
<p style="text-align: right;">Page 31</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. When you say "the records,"</p> <p>3 what records?</p> <p>4 A. The hospital records.</p> <p>5 Q. Of who?</p> <p>6 A. Of Mr. Schoolcraft.</p> <p>7 Q. Did you review the entire</p> <p>8 hospital chart?</p> <p>9 A. Not the entire, just go through</p> <p>10 maybe five pages.</p> <p>11 Q. What five pages did you look</p> <p>12 at?</p> <p>13 A. Just going through</p> <p>14 [indicating].</p> <p>15 Q. What was the nature of the</p> <p>16 things you looked at?</p> <p>17 A. I want to the consult, and I</p> <p>18 went through the notes of the resident.</p> <p>19 Q. Your consult and the --</p> <p>20 A. The consult of the resident and</p> <p>21 the notes of the residents when the</p> <p>22 resident was working in the emergency</p> <p>23 room.</p> <p>24 Q. Your consult and the resident's</p> <p>25 note in your --</p>	<p style="text-align: right;">Page 33</p> <p>1 L. ALDANA-BERNIER</p> <p>2 October 2009 up until today, did you have</p> <p>3 access to the entire Jamaica Hospital</p> <p>4 chart, at least as you understood it to</p> <p>5 be?</p> <p>6 A. No.</p> <p>7 Q. No one showed it to you?</p> <p>8 A. No.</p> <p>9 Q. Did you ask to review it?</p> <p>10 A. Before, but I was stopped.</p> <p>11 Q. Who stopped you?</p> <p>12 A. The hospital risk management.</p> <p>13 Q. So you at some point decided</p> <p>14 you want to look at the chart, and risk</p> <p>15 management asked you not to do that?</p> <p>16 A. The very, very first time, yes.</p> <p>17 I don't remember when was that but was</p> <p>18 risk management.</p> <p>19 Q. Was that when you received some</p> <p>20 type of summons and complaint regarding</p> <p>21 this lawsuit?</p> <p>22 A. Yes.</p> <p>23 Q. After that you knew you were</p> <p>24 coming here to testify, correct,</p> <p>25 somewhere before today someone told you</p>

<p style="text-align: right;">Page 34</p> <p>1 L. ALDANA-BERNIER</p> <p>2 have to testify, right?</p> <p>3 A. Yes.</p> <p>4 Q. In fact this is the second time</p> <p>5 that you arrived in this room to testify,</p> <p>6 correct?</p> <p>7 A. Yes.</p> <p>8 Q. In anticipation of either of</p> <p>9 those two times, you never reviewed the</p> <p>10 chart other than the notes you --</p> <p>11 A. You're right.</p> <p>12 Q. You never reviewed any chart</p> <p>13 with your handwriting on it prior to</p> <p>14 today?</p> <p>15 A. My handwriting?</p> <p>16 Q. Yes.</p> <p>17 A. I saw it.</p> <p>18 Q. So you read your handwriting or</p> <p>19 your notes?</p> <p>20 A. Yes.</p> <p>21 Q. So now you have told me you</p> <p>22 have read the consult of a resident,</p> <p>23 psychiatric resident, in the medical ER</p> <p>24 and the notes in the psychiatric ER?</p> <p>25 A. [Indicating.]</p>	<p style="text-align: right;">Page 36</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. No.</p> <p>3 Q. Have you spoken to anybody at</p> <p>4 Jamaica Hospital --</p> <p>5 MR. SUCKLE: Withdrawn.</p> <p>6 Q. Have you spoken to anybody at</p> <p>7 Jamaica Hospital about your care and</p> <p>8 treatment of Mr. Schoolcraft?</p> <p>9 A. No.</p> <p>10 Q. How about anybody else's care</p> <p>11 and treatment of Mr. Schoolcraft?</p> <p>12 A. Who?</p> <p>13 Q. Have you ever spoken to anybody</p> <p>14 at Jamaica Hospital about anybody else's</p> <p>15 care and treatment of Mr. Schoolcraft?</p> <p>16 A. No.</p> <p>17 Q. Have you spoken to anybody from</p> <p>18 the New York City Police Department</p> <p>19 regarding your care and treatment of Mr.</p> <p>20 Schoolcraft?</p> <p>21 A. No.</p> <p>22 Q. And just for the record, what</p> <p>23 is risk management? You said you spoke</p> <p>24 to risk management. What is that?</p> <p>25 A. They are the legal department.</p>
<p style="text-align: right;">Page 35</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. And your notes?</p> <p>3 MR. CALLAN: Those were her</p> <p>4 notes, Counsel. I think that's the</p> <p>5 confusion.</p> <p>6 MR. SUCKLE: I'll clarify.</p> <p>7 Thank you.</p> <p>8 A. Yes.</p> <p>9 Q. As your counsel points out, the</p> <p>10 psych ER notes included your notes?</p> <p>11 A. Yes.</p> <p>12 Q. Did you make any notes in the</p> <p>13 chart that you were aware of that were</p> <p>14 not done in the psych ER?</p> <p>15 A. No.</p> <p>16 Q. And did you review any other</p> <p>17 documents in anticipation of coming here</p> <p>18 to testify?</p> <p>19 A. No.</p> <p>20 Q. Did you read any transcripts of</p> <p>21 any testimony prior to today?</p> <p>22 A. No.</p> <p>23 Q. Did you speak to anybody at</p> <p>24 Jamaica Hospital regarding preparing for</p> <p>25 testimony here today?</p>	<p style="text-align: right;">Page 37</p> <p>1 L. ALDANA-BERNIER</p> <p>2 MR. SUCKLE: Mark this 69.</p> <p>3 [The document was hereby marked</p> <p>4 as Plaintiff's Exhibit 69 for</p> <p>5 identification, as of this date.]</p> <p>6 MR. CALLAN: I'll show you</p> <p>7 what's been marked as Plaintiff's</p> <p>8 Exhibit 69.</p> <p>9 Counsel from Jamaica Hospital,</p> <p>10 is that the hospital chart provided to</p> <p>11 you by Jamaica Hospital for Adrian</p> <p>12 Schoolcraft?</p> <p>13 MR. RADOMISLI: Yes.</p> <p>14 Q. I will ask you, do you know</p> <p>15 what this is?</p> <p>16 A. That's our record.</p> <p>17 Q. When you say "our record," you</p> <p>18 mean Jamaica Hospital's record?</p> <p>19 A. Jamaica Hospital record.</p> <p>20 Q. That record is created as part</p> <p>21 of the business of Jamaica Hospital,</p> <p>22 correct?</p> <p>23 A. Correct.</p> <p>24 Q. It's the business of Jamaica</p> <p>25 Hospital to make that record?</p>

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<p style="text-align: right;">Page 38</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. You're right.</p> <p>3 Q. And that record is kept at</p> <p>4 Jamaica Hospital as part of its regular</p> <p>5 course of business, correct?</p> <p>6 A. Yes.</p> <p>7 Q. And entries in this chart were</p> <p>8 made on or about the dates listed in</p> <p>9 here?</p> <p>10 A. Yes.</p> <p>11 Q. Is this the record that you had</p> <p>12 access to review prior to testifying here</p> <p>13 today?</p> <p>14 A. Yes.</p> <p>15 Q. Or a copy of it?</p> <p>16 A. Or the copy, yes.</p> <p>17 Q. But you did have a chance to</p> <p>18 review this original record here today</p> <p>19 prior to testifying?</p> <p>20 A. Yes, when I came in here.</p> <p>21 Q. Can you tell me from your</p> <p>22 review of the record before we go through</p> <p>23 the record, generally what was your role,</p> <p>24 if at all, was with regard to the care</p> <p>25 and treatment of Mr. Schoolcraft?</p>	<p style="text-align: right;">Page 40</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Yes.</p> <p>3 A. Yes.</p> <p>4 Q. Did you also learn how to make</p> <p>5 hospital records during your training as</p> <p>6 a physician?</p> <p>7 A. Yes.</p> <p>8 Q. And as a resident, did you</p> <p>9 learn about how to make hospital records?</p> <p>10 A. Yes.</p> <p>11 Q. How about Kings County, did you</p> <p>12 learn there about how to make hospital</p> <p>13 records?</p> <p>14 A. Yes.</p> <p>15 Q. And the same for Coney Island</p> <p>16 Hospital, correct?</p> <p>17 A. Yes.</p> <p>18 Q. And Jamaica Hospital as well?</p> <p>19 A. Yes.</p> <p>20 Q. In fact do you know what the</p> <p>21 purpose of creating a hospital record is?</p> <p>22 A. That's to keep a file on the</p> <p>23 patient.</p> <p>24 Q. Is that just to have a file, or</p> <p>25 is there a medical purpose for creating a</p>
<p style="text-align: right;">Page 39</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. What was my role in the care?</p> <p>3 Q. Yes.</p> <p>4 A. My role was I as soon as I came</p> <p>5 to the emergency room, I had the</p> <p>6 responsibility to go and see every</p> <p>7 patient that was left over under my care</p> <p>8 and Mr. Schoolcraft was one of them so I</p> <p>9 had to, like, every other patient go and</p> <p>10 see him, speak to him, evaluate him.</p> <p>11 Q. Evaluate him?</p> <p>12 A. Yes.</p> <p>13 And then I have to read the</p> <p>14 notes of the initial doctor who was the</p> <p>15 resident that saw the patient. I have to</p> <p>16 assess that note, and make my decision if</p> <p>17 needed to be admitted.</p> <p>18 Q. In your training as a nurse,</p> <p>19 did you learn about the creation of</p> <p>20 hospital records?</p> <p>21 A. Did I what?</p> <p>22 Q. Did you learn about how to make</p> <p>23 hospital records in your training as a</p> <p>24 nurse?</p> <p>25 A. How to make hospital records?</p>	<p style="text-align: right;">Page 41</p> <p>1 L. ALDANA-BERNIER</p> <p>2 hospital record?</p> <p>3 A. Yes, a medical purpose for the</p> <p>4 file to ascertain that the patient was in</p> <p>5 that place when he was treated.</p> <p>6 Q. Just to know whether or know he</p> <p>7 was physically in the place?</p> <p>8 A. It's a medical record of the</p> <p>9 patient, complete medical record of the</p> <p>10 patient.</p> <p>11 Q. When you say "complete medical</p> <p>12 record," it's supposed to show the</p> <p>13 treatment of a patient at a facility?</p> <p>14 A. Treatment, treatment plan, and</p> <p>15 discharge plan.</p> <p>16 Q. If there is an evaluation of</p> <p>17 the patient, the records are required to</p> <p>18 have details of that evaluation, correct?</p> <p>19 A. Yes.</p> <p>20 Q. If there is an examination of</p> <p>21 the patient, it's required to create</p> <p>22 notes regarding that --</p> <p>23 MR. CALLAN: Objection.</p> <p>24 A. Yes.</p> <p>25 Q. Does good and accepted medical</p>

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<p style="text-align: right;">Page 42</p> <p>1 L. ALDANA-BERNIER</p> <p>2 practice require when a physician</p> <p>3 examines a patient they make a note of</p> <p>4 that examination?</p> <p>5 A. Yes.</p> <p>6 Q. Does good and accepted medical</p> <p>7 practice require when a physician makes</p> <p>8 an evaluation of the patient, they need</p> <p>9 to make a note of that evaluation?</p> <p>10 A. Yes.</p> <p>11 Q. And why do physicians make</p> <p>12 notes of their examinations of patients</p> <p>13 in hospital charts?</p> <p>14 A. Why do we make notes?</p> <p>15 Q. Yes.</p> <p>16 A. We have to make notes to make</p> <p>17 sure that we have seen the patient, that</p> <p>18 we have assessed what we are supposed to</p> <p>19 be doing for the patient, and to make</p> <p>20 sure there is a record that the patient</p> <p>21 was assessed and evaluated and treated;</p> <p>22 that's why we do it.</p> <p>23 Q. Isn't it also important to note</p> <p>24 in the records either your examinations</p> <p>25 or evaluation of a patient so that in the</p>	<p style="text-align: right;">Page 44</p> <p>1 L. ALDANA-BERNIER</p> <p>2 went back and read some previous notes</p> <p>3 that other physicians made in Mr.</p> <p>4 Schoolcraft's chart during your care and</p> <p>5 treatment of him, correct?</p> <p>6 A. That's correct.</p> <p>7 Q. It's important for you to have</p> <p>8 notes from other physicians so you know</p> <p>9 what their evaluations were, correct?</p> <p>10 A. That's correct.</p> <p>11 Q. Also to know what their</p> <p>12 examinations were?</p> <p>13 A. That's correct.</p> <p>14 Q. And to know what they base</p> <p>15 their examinations and evaluations on,</p> <p>16 correct?</p> <p>17 A. That's correct.</p> <p>18 Q. The only way to know that would</p> <p>19 be to read the chart and see what is</p> <p>20 written down, correct?</p> <p>21 MR. RADOMISLI: Objection to</p> <p>22 form.</p> <p>23 A. That's correct.</p> <p>24 Q. When you went and evaluated Mr.</p> <p>25 Schoolcraft, did you actually speak to</p>
<p style="text-align: right;">Page 43</p> <p>1 L. ALDANA-BERNIER</p> <p>2 future someone else can read those</p> <p>3 evaluations and examinations and</p> <p>4 understand what took place?</p> <p>5 A. You're right.</p> <p>6 Q. You know in medicine sometimes</p> <p>7 you are not the last physician to see a</p> <p>8 patient, correct?</p> <p>9 A. That's right.</p> <p>10 Q. Especially in a hospital</p> <p>11 setting?</p> <p>12 A. That's correct.</p> <p>13 Q. Sometimes you will evaluate or</p> <p>14 see a patient and other physicians will</p> <p>15 see a patient and evaluate them, correct?</p> <p>16 A. Yes.</p> <p>17 Q. And you know that other</p> <p>18 physicians may want to review what</p> <p>19 happened in the past, correct?</p> <p>20 A. That's correct.</p> <p>21 Q. That's one of the reasons for</p> <p>22 creating a hospital record and notes in</p> <p>23 the hospital, correct?</p> <p>24 A. That's correct.</p> <p>25 Q. In fact you testified that you</p>	<p style="text-align: right;">Page 45</p> <p>1 L. ALDANA-BERNIER</p> <p>2 the residents that had written the notes</p> <p>3 that you just described?</p> <p>4 A. I did not speak to the</p> <p>5 residents. I read his notes.</p> <p>6 Q. You relied on the records to</p> <p>7 determine what previously had taken place</p> <p>8 with Mr. Schoolcraft; is that what you're</p> <p>9 saying?</p> <p>10 A. I read his notes. I had to go</p> <p>11 see the patient.</p> <p>12 Q. Do you know whether or not any</p> <p>13 physician reviewed any of your records</p> <p>14 after you treated Mr. Schoolcraft?</p> <p>15 A. I do not know if they reviewed</p> <p>16 my records.</p> <p>17 Q. Do you know if they did?</p> <p>18 A. I'm sure they go and read the</p> <p>19 notes.</p> <p>20 Q. When you examine a patient in</p> <p>21 the psychiatric ER, is that a physical</p> <p>22 examination, psychiatric examination, or</p> <p>23 something else?</p> <p>24 MR. LEE: Objection to form.</p> <p>25 A. Psychiatric evaluation.</p>

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<p style="text-align: right;">Page 46</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Did you in October 2009 or</p> <p>3 November 2009 have a standard practice</p> <p>4 how you did a psychiatric examination?</p> <p>5 A. Yes, yes. Evaluate the patient</p> <p>6 and get the history of present illness</p> <p>7 and the past history and then you do a</p> <p>8 mental status exam.</p> <p>9 Q. So you do history, past</p> <p>10 history, and mental status exam?</p> <p>11 A. Yes.</p> <p>12 Q. And the history is gotten by</p> <p>13 asking the patient questions?</p> <p>14 A. Yes.</p> <p>15 Q. And any other way that you get</p> <p>16 the history?</p> <p>17 A. It's just through interaction.</p> <p>18 Q. With the patient?</p> <p>19 A. With the patient, yes.</p> <p>20 Q. So you ask a question, the</p> <p>21 patient answers, so you get the history?</p> <p>22 A. Yes.</p> <p>23 Q. How about the past medical</p> <p>24 history, same thing?</p> <p>25 A. Yeah, it's history, present</p>	<p style="text-align: right;">Page 48</p> <p>1 L. ALDANA-BERNIER</p> <p>2 appearance and also assessing his speech</p> <p>3 and assessing his insight and judgment.</p> <p>4 Q. This is how you do your mental</p> <p>5 status exam on all the psychiatric</p> <p>6 patients --</p> <p>7 A. Yes.</p> <p>8 Q. You do your own examination,</p> <p>9 correct?</p> <p>10 A. Yes.</p> <p>11 Q. Let's go to testing conative</p> <p>12 functioning, how do you do that?</p> <p>13 A. Testing orientation, checking</p> <p>14 his memory.</p> <p>15 Q. And you ask him questions?</p> <p>16 A. Yes.</p> <p>17 Q. You did a mental status</p> <p>18 examination on Mr. Schoolcraft, right?</p> <p>19 A. Yes.</p> <p>20 Q. You asked him questions about</p> <p>21 his memory, correct?</p> <p>22 A. We do that on all our patients.</p> <p>23 Q. You did that on Mr.</p> <p>24 Schoolcraft, correct?</p> <p>25 A. We do it on all of our</p>
<p style="text-align: right;">Page 47</p> <p>1 L. ALDANA-BERNIER</p> <p>2 illness, past history, past medical</p> <p>3 history, and the mental status exam.</p> <p>4 Q. Everything but the mental</p> <p>5 status exam is done by asking the patient</p> <p>6 questions, getting answers, and writing</p> <p>7 it down?</p> <p>8 A. Yes.</p> <p>9 Q. Why did you write those things</p> <p>10 down?</p> <p>11 A. For records so that somebody</p> <p>12 else when the next doctor comes will be</p> <p>13 able to read the notes.</p> <p>14 Q. What is a mental status exam?</p> <p>15 A. A mental status exam is --</p> <p>16 entails different questions like testing</p> <p>17 cognitive function.</p> <p>18 Q. Conative function?</p> <p>19 A. Yes.</p> <p>20 Testing his abstraction,</p> <p>21 testing his thought process, testing the</p> <p>22 thought content whether there is a</p> <p>23 delusion, there is a hallucination, if he</p> <p>24 was suicidal or homicidal; also includes</p> <p>25 visual assessment which is looking at his</p>	<p style="text-align: right;">Page 49</p> <p>1 L. ALDANA-BERNIER</p> <p>2 patients. I may have done on Mr.</p> <p>3 Schoolcraft.</p> <p>4 Q. Any other things that you do</p> <p>5 with regard to conative function in your</p> <p>6 mental status examination?</p> <p>7 A. Usually the orientation and the</p> <p>8 memory.</p> <p>9 Q. When you say "orientation,"</p> <p>10 what do you mean?</p> <p>11 A. Asking what date is it today,</p> <p>12 where are you right now, if he is aware</p> <p>13 of his surrounding, where he was.</p> <p>14 Q. And good and accepted medical</p> <p>15 practice requires you to perform this</p> <p>16 mental status examination of his</p> <p>17 cognitive functioning, correct?</p> <p>18 A. That's correct.</p> <p>19 Q. And to make a note of your</p> <p>20 findings, correct?</p> <p>21 A. Correct.</p> <p>22 Q. And make a note of your</p> <p>23 examination of his cognitive functioning,</p> <p>24 correct?</p> <p>25 A. That's correct.</p>

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<p style="text-align: right;">Page 50</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. You indicated obstruction</p> <p>3 [sic], what is that?</p> <p>4 A. Trying to test the intellectual</p> <p>5 capacity by giving problems or decision</p> <p>6 making if you give a situation.</p> <p>7 Q. Did you perform this part of</p> <p>8 the mental status examination on Mr.</p> <p>9 Schoolcraft?</p> <p>10 A. We do that in all of our</p> <p>11 patients. I may have done it</p> <p>12 [indicating].</p> <p>13 Q. So you did it with Mr.</p> <p>14 Schoolcraft?</p> <p>15 A. Yes.</p> <p>16 Q. He is one of your patients,</p> <p>17 correct?</p> <p>18 A. Yeah.</p> <p>19 Q. And does good and accepted</p> <p>20 medical practice require you perform this</p> <p>21 obstruction [sic] test --</p> <p>22 MR. CALLAN: Objection.</p> <p>23 MR. RADOMISLI: Objection.</p> <p>24 Q. -- mental status examination?</p> <p>25 MR. CALLAN: Objection to the</p>	<p style="text-align: right;">Page 52</p> <p>1 L. ALDANA-BERNIER</p> <p>2 findings, correct?</p> <p>3 A. Yes.</p> <p>4 Q. You talked about whether or not</p> <p>5 part of the mental status examination is</p> <p>6 whether or not someone is delusional?</p> <p>7 A. Yes.</p> <p>8 Q. How do you that?</p> <p>9 A. Delusional is false belief.</p> <p>10 Q. False belief?</p> <p>11 A. That's not in agreement with</p> <p>12 one's culture.</p> <p>13 Q. How do you perform that test?</p> <p>14 A. You usually ask them or when</p> <p>15 the patient comes and say somebody</p> <p>16 running after me, somebody is chasing me,</p> <p>17 or there is a conspiracy or plot against</p> <p>18 me; that is a delusional belief, a false</p> <p>19 belief.</p> <p>20 Q. How do you perform that test?</p> <p>21 A. They come and tell you.</p> <p>22 Q. You ask them?</p> <p>23 A. The patient tells you.</p> <p>24 Q. Have a conversation?</p> <p>25 A. Yes.</p>
<p style="text-align: right;">Page 51</p> <p>1 L. ALDANA-BERNIER</p> <p>2 form of the question.</p> <p>3 MR. SMITH: It's abstraction.</p> <p>4 You said obstruction. Let's rephrase</p> <p>5 that.</p> <p>6 Q. Does good and accepted medical</p> <p>7 practice require you to perform this</p> <p>8 abstraction test?</p> <p>9 A. Yes.</p> <p>10 Q. And to make notes of your</p> <p>11 findings during that test?</p> <p>12 A. Yes.</p> <p>13 Q. Thought process, what is that?</p> <p>14 A. Thought process.</p> <p>15 Q. You said part of the test was</p> <p>16 thought process?</p> <p>17 A. If he was thinking linear, is</p> <p>18 he goal directed or is he was over --</p> <p>19 going [sic] disorganized or loose.</p> <p>20 Q. Good and accepted medical</p> <p>21 practice requires you to perform that</p> <p>22 examination as part of your mental status</p> <p>23 examination?</p> <p>24 A. Yes.</p> <p>25 Q. And you make notes of your</p>	<p style="text-align: right;">Page 53</p> <p>1 L. ALDANA-BERNIER</p> <p>2 THE REPORTER: You have to slow</p> <p>3 down.</p> <p>4 Q. And good and accepted medical</p> <p>5 practice requires you to make a note of</p> <p>6 that conversation, correct?</p> <p>7 A. Yes.</p> <p>8 Q. And to detail what the patient</p> <p>9 says, correct?</p> <p>10 A. Yes.</p> <p>11 Q. For each of your patients,</p> <p>12 correct?</p> <p>13 A. Yes.</p> <p>14 Q. And you did that with Mr.</p> <p>15 Schoolcraft, correct?</p> <p>16 A. Yes.</p> <p>17 Q. Suicidal tendencies, you said</p> <p>18 that was part of your mental status</p> <p>19 examination --</p> <p>20 A. Yes.</p> <p>21 Q. -- what did you mean?</p> <p>22 A. We have to ask them if they</p> <p>23 were suicidal, contemplating, if they are</p> <p>24 -- if they have a plan.</p> <p>25 Q. And does good and accepted</p>

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<p style="text-align: right;">Page 54</p> <p>1 L. ALDANA-BERNIER</p> <p>2 medical practice require you to make a</p> <p>3 note of their responses to those</p> <p>4 questions?</p> <p>5 A. Yes.</p> <p>6 Q. Did you ask Mr. Schoolcraft</p> <p>7 those questions?</p> <p>8 A. Should have been asked. I'm</p> <p>9 sure asked.</p> <p>10 Q. Should have been asked?</p> <p>11 A. We ask for every patient.</p> <p>12 Q. So you asked it of Mr.</p> <p>13 Schoolcraft?</p> <p>14 A. Yes.</p> <p>15 Q. Did you make a note of his</p> <p>16 responses?</p> <p>17 MR. CALLAN: You can look at the</p> <p>18 chart.</p> <p>19 Are you asking from her memory</p> <p>20 or --</p> <p>21 Q. If you recall?</p> <p>22 A. I do not recall if I did write</p> <p>23 it.</p> <p>24 Q. But good and accepted medical</p> <p>25 practice would require you to make a note</p>	<p style="text-align: right;">Page 56</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. -- regarding Mr. Schoolcraft's</p> <p>3 response regarding homicidal tendencies?</p> <p>4 A. Yes.</p> <p>5 Q. And good and accepted medical</p> <p>6 practice requires you to make a note of</p> <p>7 both suicidal or homicidal</p> <p>8 representations that the patient makes to</p> <p>9 you as a physician, correct?</p> <p>10 A. Correct.</p> <p>11 Q. For every patient that makes</p> <p>12 representation about a method by which</p> <p>13 they were going to perform a suicide or a</p> <p>14 homicide, you would make a note of that,</p> <p>15 correct?</p> <p>16 A. Correct.</p> <p>17 Q. Because good and accepted</p> <p>18 medical practice would require you to</p> <p>19 make that note, correct?</p> <p>20 A. That's correct.</p> <p>21 Q. If there is no such note, the</p> <p>22 patient didn't say it, correct?</p> <p>23 A. That's correct.</p> <p>24 Q. If the patient did not express</p> <p>25 a suicidal tendency, you would not make a</p>
<p style="text-align: right;">Page 55</p> <p>1 L. ALDANA-BERNIER</p> <p>2 of his responses to your questions</p> <p>3 regarding suicidal tendencies?</p> <p>4 A. Yes.</p> <p>5 Q. How about homicidal tendencies,</p> <p>6 how do you test for that?</p> <p>7 A. When a patient comes and tell</p> <p>8 you he's has thoughts of hurting anyone,</p> <p>9 and then you will ask him if he has a</p> <p>10 plan, if he has a weapon.</p> <p>11 Q. Did you do this test on Mr.</p> <p>12 Schoolcraft?</p> <p>13 A. Yes.</p> <p>14 Q. Did Mr. Schoolcraft have a plan</p> <p>15 or a weapon?</p> <p>16 A. I will not remember.</p> <p>17 Q. Did you make any notes? Does</p> <p>18 good and accepted medical practice</p> <p>19 require you to make a note of Mr.</p> <p>20 Schoolcraft's responses to your question</p> <p>21 regarding homicidal tendencies?</p> <p>22 A. I will not remember.</p> <p>23 Q. Does good and accepted medical</p> <p>24 practice require you to make that note --</p> <p>25 A. Yes.</p>	<p style="text-align: right;">Page 57</p> <p>1 L. ALDANA-BERNIER</p> <p>2 note of that?</p> <p>3 MR. CALLAN: Objection to form.</p> <p>4 MR. SUCKLE: I will rephrase it.</p> <p>5 Q. If the patient did not express</p> <p>6 how they were going to perform some type</p> <p>7 of homicidal act --</p> <p>8 MR. SUCKLE: I'm withdrawing</p> <p>9 that question too.</p> <p>10 Q. When a patient expresses a</p> <p>11 suicidal thought, do you write down the</p> <p>12 details of that thought in --</p> <p>13 A. Yes.</p> <p>14 Q. Because good and accepted</p> <p>15 medical practice requires you to do that,</p> <p>16 correct?</p> <p>17 A. Yes.</p> <p>18 Q. And the absence of any note</p> <p>19 regarding homicidal thought in your</p> <p>20 records means the patient did not express</p> <p>21 a homicidal thought, correct?</p> <p>22 A. It will say that the patient is</p> <p>23 not homicidal or they will put a negative</p> <p>24 sign, a circle.</p> <p>25 Q. I'm talking about you in your</p>

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<p style="text-align: right;">Page 58</p> <p>1 L. ALDANA-BERNIER</p> <p>2 record.</p> <p>3 A. Uh-huh.</p> <p>4 Q. When a patient expresses how</p> <p>5 they intend to commit a homicidal act, do</p> <p>6 you write down the thought of the patient</p> <p>7 how they were going to commit the</p> <p>8 homicidal act?</p> <p>9 A. Yes.</p> <p>10 Q. When a patient expresses how</p> <p>11 they are going to commit a suicidal act,</p> <p>12 do you write down what the patient tells</p> <p>13 you about how they were going to perform</p> <p>14 a suicidal act?</p> <p>15 A. That's correct.</p> <p>16 Q. If there is no note regarding</p> <p>17 how a patient is going to commit a</p> <p>18 suicidal act, that means the patient</p> <p>19 didn't express to you how they were going</p> <p>20 to commit a suicidal act, correct?</p> <p>21 A. Correct.</p> <p>22 Q. If there is no note regarding</p> <p>23 how a patient was planing to commit a</p> <p>24 homicidal act, that means the patient</p> <p>25 didn't express to you how they were going</p>	<p style="text-align: right;">Page 60</p> <p>1 L. ALDANA-BERNIER</p> <p>2 MR. CALLAN: Objection to form.</p> <p>3 MR. SMITH: Objection to form.</p> <p>4 There is a timing issue.</p> <p>5 Q. Was Mr. Schoolcraft's medical</p> <p>6 chart as it existed at the time that you</p> <p>7 saw him available to you at Jamaica</p> <p>8 Hospital's emergency room?</p> <p>9 A. Yes.</p> <p>10 Q. Did you have physically Mr.</p> <p>11 Schoolcraft's chart in your presence when</p> <p>12 you evaluated him?</p> <p>13 MR. CALLAN: She already said</p> <p>14 yes to that, Counsel.</p> <p>15 MR. SMITH: I don't think she</p> <p>16 did.</p> <p>17 Q. Did you have it in your</p> <p>18 presence when you evaluated him?</p> <p>19 A. I saw it before I saw him.</p> <p>20 Q. Where were the charts keep in</p> <p>21 this psychiatric emergency room at least</p> <p>22 as it was in November 2009?</p> <p>23 A. It's usually in the nursing</p> <p>24 station.</p> <p>25 Q. Are you familiar with the</p>
<p style="text-align: right;">Page 59</p> <p>1 L. ALDANA-BERNIER</p> <p>2 to commit a homicidal act, correct?</p> <p>3 A. That's correct.</p> <p>4 Q. You have to assess their</p> <p>5 speech. How do you do that?</p> <p>6 A. Characterize the volume and the</p> <p>7 pitch: Is it soft, is it normal.</p> <p>8 Q. And again, good and accepted</p> <p>9 medical practice requires you as a</p> <p>10 physician while performing this mental</p> <p>11 status examination to make a note</p> <p>12 regarding the assessment of speech,</p> <p>13 correct?</p> <p>14 A. That's correct.</p> <p>15 Q. Did you have access to Mr.</p> <p>16 Schoolcraft's entire chart when you first</p> <p>17 saw him?</p> <p>18 Did you understand the</p> <p>19 question.</p> <p>20 A. Yes.</p> <p>21 Q. Physically, this chart we now</p> <p>22 have as Exhibit 69 in some form was fully</p> <p>23 accessible to you in the psychiatric</p> <p>24 emergency room when you saw Mr.</p> <p>25 Schoolcraft, correct?</p>	<p style="text-align: right;">Page 61</p> <p>1 L. ALDANA-BERNIER</p> <p>2 policies and procedures for Jamaica</p> <p>3 Hospital with regard to the use of</p> <p>4 restraints as they existed in 2009?</p> <p>5 A. Yes.</p> <p>6 Q. What is your understanding of</p> <p>7 that?</p> <p>8 A. A restraint a usually applied</p> <p>9 on a patient who is a danger to himself</p> <p>10 or a danger to the other patients or</p> <p>11 someone is very agitated, aggressive, or</p> <p>12 violent.</p> <p>13 They usually come in soft</p> <p>14 restraint, four-point restraints usually</p> <p>15 applied for two hours, and then staff has</p> <p>16 to go monitor those restraints every 15</p> <p>17 minutes to make sure there is no</p> <p>18 impairment of circulation.</p> <p>19 Q. You described a type of</p> <p>20 restraint. I missed what you said.</p> <p>21 A. Soft restraint.</p> <p>22 Q. What is a soft restraint?</p> <p>23 A. They are not leather. They</p> <p>24 were like Velcro, like bandages, so that</p> <p>25 they wouldn't be very constricting to the</p>

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<p style="text-align: right;">Page 62</p> <p>1 L. ALDANA-BERNIER</p> <p>2 hand or the wrist of the patient.</p> <p>3 Q. Are those the only type of</p> <p>4 restraints that Jamaica Hospital used in</p> <p>5 2009?</p> <p>6 A. Yes.</p> <p>7 Q. And who makes the decision</p> <p>8 regarding whether or not restraints are</p> <p>9 to be applied to a patient?</p> <p>10 A. When the doctor is not present,</p> <p>11 any nursing staff that's there can make a</p> <p>12 decision if the patient should be</p> <p>13 restrained.</p> <p>14 What they do is call the doctor</p> <p>15 and they will tell the doctor that a</p> <p>16 patient is going to be restrained, and in</p> <p>17 30 minutes that doctor has to go and</p> <p>18 check the patient.</p> <p>19 Q. When a patient was brought in</p> <p>20 in handcuffs at Jamaica Hospital in 2009,</p> <p>21 was there a procedure for assessment as</p> <p>22 to whether or not that person should be</p> <p>23 put into hospital restraints or not?</p> <p>24 A. Repeat that again.</p> <p>25 Q. Sure.</p>	<p style="text-align: right;">Page 64</p> <p>1 L. ALDANA-BERNIER</p> <p>2 been describing?</p> <p>3 MR. RADOMISLI: Objection to</p> <p>4 form.</p> <p>5 MR. CALLAN: I join the</p> <p>6 objection.</p> <p>7 Q. Does good and accepted medical</p> <p>8 practice require when a patient was</p> <p>9 brought in in handcuffs that the hospital</p> <p>10 replace those handcuffs with soft</p> <p>11 restraints in 2009?</p> <p>12 MR. RADOMISLI: Objection to</p> <p>13 form.</p> <p>14 A. Not all handcuffs are soft</p> <p>15 restraints. I'm trying to say if we</p> <p>16 think they were violent and a danger or</p> <p>17 if they are going to be destructive, we</p> <p>18 have to put them in restraints.</p> <p>19 Q. When you say not all handcuffed</p> <p>20 people are put in restraints, are all</p> <p>21 people that need to be restrained removed</p> <p>22 from handcuffs and put into soft</p> <p>23 restraints?</p> <p>24 A. If they were violent.</p> <p>25 Q. How soon after admission in</p>
<p style="text-align: right;">Page 63</p> <p>1 L. ALDANA-BERNIER</p> <p>2 When a patient was brought into</p> <p>3 the hospital, Jamaica Hospital, in</p> <p>4 handcuffs in 2009, was there a hospital</p> <p>5 procedure for determining whether or not</p> <p>6 that patient should be put in the soft</p> <p>7 restraints that you described?</p> <p>8 A. Depends on the case. If the</p> <p>9 patient is in handcuffs taken to our</p> <p>10 emergency room and the patient is</p> <p>11 agitated or violent and a danger to that</p> <p>12 community of the ER, then he will have to</p> <p>13 be restrained. We usually restrain those</p> <p>14 kind of patients, violent patients.</p> <p>15 Q. When a violent patient comes in</p> <p>16 in handcuffs, they were then placed into</p> <p>17 the soft restraints, correct?</p> <p>18 A. Yes.</p> <p>19 Q. Why is that?</p> <p>20 A. If they are violent, if we see</p> <p>21 them as a potential danger, then we have</p> <p>22 to restrain them.</p> <p>23 Q. Are the only appropriate</p> <p>24 restraints to be used at Jamaica Hospital</p> <p>25 in 2009 the soft restraints that you have</p>	<p style="text-align: right;">Page 65</p> <p>1 L. ALDANA-BERNIER</p> <p>2 handcuffs should the patient be put into</p> <p>3 soft restraints?</p> <p>4 A. They go through triage. If</p> <p>5 triage assess the patient and they assess</p> <p>6 that the patient needs to be on</p> <p>7 restraints because they were violent, as</p> <p>8 soon as they come into the emergency</p> <p>9 room, we have to take off the handcuffs</p> <p>10 and put them on four-point restraints.</p> <p>11 Q. Why is that?</p> <p>12 A. Because they are dangerous.</p> <p>13 That's after the assessment. If we know</p> <p>14 they are dangerous, we have to put them</p> <p>15 on restraints.</p> <p>16 Q. Am I correct once a patient is</p> <p>17 brought into Jamaica Hospital in</p> <p>18 handcuffs and they become a patient of</p> <p>19 the hospital, physicians are going to</p> <p>20 make decisions about restraints and the</p> <p>21 type of restraints to be used, correct?</p> <p>22 A. Yes.</p> <p>23 Q. Not the police officers,</p> <p>24 correct?</p> <p>25 A. No, they don't have a role.</p>

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<p style="text-align: right;">Page 66</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. When you say "they don't have a</p> <p>3 role," what do you mean?</p> <p>4 A. They don't have a role in</p> <p>5 deciding if our patient should be</p> <p>6 restrained or not.</p> <p>7 Q. If a patient is handcuff and</p> <p>8 the hospital wants the handcuffs removed,</p> <p>9 they should be removed, correct?</p> <p>10 MR. RADOMISLI: Objection to</p> <p>11 form.</p> <p>12 MR. CALLAN: Objection to form.</p> <p>13 A. The handcuffs?</p> <p>14 Q. Yes.</p> <p>15 A. If we think they have to --</p> <p>16 clarify that. There are many, many -- go</p> <p>17 ahead. Can you clarify it?</p> <p>18 MR. SUCKLE: We will move onto</p> <p>19 something else.</p> <p>20 Q. Did you have any role in</p> <p>21 writing any written rules or regulations</p> <p>22 with regards to restraints at Jamaica</p> <p>23 Hospital?</p> <p>24 A. Do I have a role -- I may have</p> <p>25 sit in in one of those sessions, yes.</p>	<p style="text-align: right;">Page 68</p> <p>1 L. ALDANA-BERNIER</p> <p>2 have a 13-bed capacity. It's always full</p> <p>3 so I wouldn't know how many patients were</p> <p>4 there.</p> <p>5 MR. SMITH: Did she say 30 beds?</p> <p>6 THE WITNESS: Thirteen.</p> <p>7 Q. Am I correct that the first</p> <p>8 time that you encountered Mr. Schoolcraft</p> <p>9 he was in the psychiatric emergency room,</p> <p>10 correct?</p> <p>11 A. That's correct.</p> <p>12 Q. I will show you what's been</p> <p>13 marked Plaintiff's Exhibit 69 for today's</p> <p>14 date. I will ask you, can you turn to</p> <p>15 the first entry that you made in this</p> <p>16 chart.</p> <p>17 [Witness complying.]</p> <p>18 A. [Indicating.]</p> <p>19 Q. And you pulled out a note, what</p> <p>20 is the date of that note?</p> <p>21 A. That was on November 2nd, 2009,</p> <p>22 three o'clock in the morning.</p> <p>23 Q. Do you know what your shift was</p> <p>24 that day?</p> <p>25 A. My shift was from eight to</p>
<p style="text-align: right;">Page 67</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. As a medical provider, your</p> <p>3 concern is for the patient's health,</p> <p>4 correct?</p> <p>5 A. Yes.</p> <p>6 Q. Did you in reviewing the chart</p> <p>7 -- how many times did you actually speak</p> <p>8 to Mr. Schoolcraft?</p> <p>9 A. I speak to him once when I came</p> <p>10 in.</p> <p>11 MR. SMITH: I'm sorry, what?</p> <p>12 THE WITNESS: When I came in.</p> <p>13 Q. When you say when you came in,</p> <p>14 when your shift started?</p> <p>15 A. Yes.</p> <p>16 Q. It's your understanding Mr.</p> <p>17 Schoolcraft was already in the hospital</p> <p>18 when your shift started?</p> <p>19 A. Yes.</p> <p>20 Q. Do you know how many other</p> <p>21 patients were under your care when you</p> <p>22 first started that shift at the</p> <p>23 psychiatric emergency room besides Mr.</p> <p>24 Schoolcraft?</p> <p>25 A. I do not know. 2009 we usually</p>	<p style="text-align: right;">Page 69</p> <p>1 L. ALDANA-BERNIER</p> <p>2 four.</p> <p>3 Q. And are you familiar with the</p> <p>4 any laws or rules regarding patients</p> <p>5 being held in psychiatric emergency rooms</p> <p>6 or hospital against their will?</p> <p>7 MR. RADOMISLI: Objection to</p> <p>8 form. Can I just see that?</p> <p>9 MR. CALLAN: [Handing.]</p> <p>10 A. Clarify that.</p> <p>11 MR. SMITH: Can I see that too?</p> <p>12 MR. CALLAN: Let's get the notes</p> <p>13 straightened out.</p> <p>14 Q. Just as a clarification, you</p> <p>15 said you made this note at three a.m.?</p> <p>16 A. That's p.m.</p> <p>17 Q. When did your shift start?</p> <p>18 A. From eight to four.</p> <p>19 MR. SMITH: A.m. or p.m.?</p> <p>20 Q. 8 a.m. to 4 p.m.?</p> <p>21 A. Yes.</p> <p>22 Q. Are you familiar with any rules</p> <p>23 in the Mental Hygiene Law for admitting</p> <p>24 patients against their will?</p> <p>25 A. Yes, the involuntary admission.</p>

18 (Pages 66 - 69)

<p style="text-align: right;">Page 70</p> <p>1 L. ALDANA-BERNIER</p> <p>2 MR. SUCKLE: Let me put a thing</p> <p>3 there so you don't lose it.</p> <p>4 MR. LEE: I didn't hear anything</p> <p>5 you just said.</p> <p>6 MR. CALLAN: His said he's</p> <p>7 putting a marker in the chart so she</p> <p>8 doesn't lose her place.</p> <p>9 Q. What do you know of that law?</p> <p>10 A. That is where two doctors will</p> <p>11 commit the patient, or we have the 9.39</p> <p>12 which is the emergency admission.</p> <p>13 Q. What was the first one?</p> <p>14 A. Involuntary, that would be the</p> <p>15 9.27, and emergency admission is the</p> <p>16 9.39.</p> <p>17 Q. What is 9.27, what does that</p> <p>18 mean?</p> <p>19 A. Involuntary admission.</p> <p>20 Q. That's somebody going to be</p> <p>21 involuntarily admitted for how long?</p> <p>22 A. After 48 hours, that depends if</p> <p>23 the patient is not better, they can be</p> <p>24 kept until six months.</p> <p>25 Q. So 9.39 of the Mental Hygiene</p>	<p style="text-align: right;">Page 72</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. At that time I used to see</p> <p>3 3,000 patients a year, most likely 2,000</p> <p>4 patients. I'm giving you a....</p> <p>5 MR. SMITH: Can you read that</p> <p>6 back.</p> <p>7 [The requested portion of the</p> <p>8 record was read.]</p> <p>9 A. An approximation.</p> <p>10 Q. Is that 2,000 patient a year?</p> <p>11 A. Two thousand patients a year.</p> <p>12 Q. You used Section 9.39 of Mental</p> <p>13 Hygiene Law to admit patients against</p> <p>14 their will 2,000 times in the year 2009,</p> <p>15 correct?</p> <p>16 A. Most likely, yes.</p> <p>17 Q. The 2,000 per year, has that</p> <p>18 basically been about how many you have</p> <p>19 admitted per year while you work at</p> <p>20 Jamaica Hospital to date?</p> <p>21 A. Cannot recall. It's hard to</p> <p>22 say.</p> <p>23 Q. This is a regular occurrence in</p> <p>24 your practice?</p> <p>25 MR. CALLAN: Objection to the</p>
<p style="text-align: right;">Page 71</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Law, what is that?</p> <p>3 A. Emergency admission to the</p> <p>4 hospital which is also involuntary.</p> <p>5 Q. In order for a patient to be</p> <p>6 involuntarily admitted to a hospital, are</p> <p>7 you familiar with the procedure that must</p> <p>8 take place?</p> <p>9 A. Yes.</p> <p>10 Q. Did you learn about this in</p> <p>11 your training at Jamaica Hospital?</p> <p>12 A. At Metropolitan Hospital.</p> <p>13 Q. And you have been familiar with</p> <p>14 that since your training at Metropolitan</p> <p>15 Hospital?</p> <p>16 A. Yeah.</p> <p>17 Q. Have you ever had to use that</p> <p>18 involuntary -- that 9.39 of the Mental</p> <p>19 Hygiene Law to admit a patient?</p> <p>20 A. Yes.</p> <p>21 Q. How many times have you done</p> <p>22 that in your career?</p> <p>23 A. Many times.</p> <p>24 Q. When you say "many," give me an</p> <p>25 idea how many is many?</p>	<p style="text-align: right;">Page 73</p> <p>1 L. ALDANA-BERNIER</p> <p>2 form of the question.</p> <p>3 Q. Do you understand my question?</p> <p>4 A. [No response.]</p> <p>5 Q. Do you understand my question?</p> <p>6 A. Say it again.</p> <p>7 Q. Sure.</p> <p>8 Admitting a patient pursuant to</p> <p>9 9.39 of the Mental Hygiene Law is a</p> <p>10 regular part of your practice, correct?</p> <p>11 A. Yes, when I was in the</p> <p>12 emergency room.</p> <p>13 Q. And does your understanding of</p> <p>14 9.39 of the Mental Hygiene Law, does that</p> <p>15 apply to any admission at Jamaica</p> <p>16 Hospital or just the psychiatric</p> <p>17 emergency room?</p> <p>18 A. Just the psychiatric emergency</p> <p>19 room.</p> <p>20 Q. So a patient can be held</p> <p>21 against their will in the</p> <p>22 medical emergency --</p> <p>23 MR. RADOMISLI: Objection to</p> <p>24 form.</p> <p>25 MR. LEE: Objection to form.</p>

19 (Pages 70 - 73)

<p style="text-align: right;">Page 74</p> <p>1 L. ALDANA-BERNIER</p> <p>2 MR. CALLAN: I join in the</p> <p>3 objection.</p> <p>4 Q. Without complying with 9.39 --</p> <p>5 MR. CALLAN: Objection.</p> <p>6 Q. Is that your understanding?</p> <p>7 A. I could admit them</p> <p>8 involuntarily, yes.</p> <p>9 Q. So a patient can be admitted</p> <p>10 pursuant to 9.39 of the Mental Hygiene</p> <p>11 Law in the medical emergency room,</p> <p>12 correct?</p> <p>13 A. In the medical emergency room?</p> <p>14 MR. CALLAN: Objection to the</p> <p>15 form of the question.</p> <p>16 Q. Yes.</p> <p>17 MR. CALLAN: You can answer.</p> <p>18 THE WITNESS: I can answer?</p> <p>19 MR. CALLAN: Yes.</p> <p>20 A. If the patient is in the</p> <p>21 medical ER and we know that the patient</p> <p>22 needs to be transferred to the</p> <p>23 psychiatric ER, then we have to move them</p> <p>24 from the medical ER to the psychiatric</p> <p>25 ER.</p>	<p style="text-align: right;">Page 76</p> <p>1 L. ALDANA-BERNIER</p> <p>2 MR. CALLAN: Same objection.</p> <p>3 A. A psychiatrist will go to the</p> <p>4 medical ER, he will assess the patient.</p> <p>5 He already assessed and evaluated. The</p> <p>6 psychiatrist will say once medically</p> <p>7 cleared, transfer the patient to the</p> <p>8 psych ER. So then the patient will be in</p> <p>9 the psych ER.</p> <p>10 Q. When a patient is in the</p> <p>11 medical ER --</p> <p>12 A. Yes.</p> <p>13 Q. -- and they want to go home,</p> <p>14 can they go home?</p> <p>15 A. It depends. If a medical</p> <p>16 issue, yes. If medically cleared they</p> <p>17 want to go home, they go home.</p> <p>18 If a psychiatric issue and the</p> <p>19 psychiatrist will say send to the psych</p> <p>20 ER, then cannot go home. They have to</p> <p>21 come to the psych ER for further</p> <p>22 stabilization or further assessment.</p> <p>23 Q. Under what standard or law,</p> <p>24 rule or regulation can a person be held,</p> <p>25 to your understanding, in the medical</p>
<p style="text-align: right;">Page 75</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. If someone is in the medical</p> <p>3 emergency room --</p> <p>4 A. Yes.</p> <p>5 Q. -- are they free to leave?</p> <p>6 A. From the medical ER?</p> <p>7 Q. Yeah.</p> <p>8 A. But that depends, yes.</p> <p>9 If the medical doctor calls for</p> <p>10 an evaluation or assessment for a</p> <p>11 psychiatric patient, if the psychiatric</p> <p>12 doctor deems the patient -- that the</p> <p>13 patient needs to be transferred to the</p> <p>14 psychiatric ER, they were not free to</p> <p>15 leave. They have to come to the</p> <p>16 psychiatric ER.</p> <p>17 Q. So it's your understanding a</p> <p>18 patient in the medical ER can be held</p> <p>19 until transferred to the psych ER for the</p> <p>20 purposes of then being evaluated at some</p> <p>21 point in the psych ER under Section 9.39</p> <p>22 of the Mental Hygiene Law; is that your</p> <p>23 understanding?</p> <p>24 MR. LEE: Objection to form.</p> <p>25 MR. RADOMISLI: Objection.</p>	<p style="text-align: right;">Page 77</p> <p>1 L. ALDANA-BERNIER</p> <p>2 emergency room pending transfer to the</p> <p>3 psych emergency room?</p> <p>4 A. If you are referring to that,</p> <p>5 there is no 9.39 or 9.27 or 9.13.</p> <p>6 If we know that the patient</p> <p>7 needs to come to psychiatry, we have to</p> <p>8 transfer the patient to psychiatry.</p> <p>9 Q. Am I correct that the only way</p> <p>10 a hospital can hold a patient based upon</p> <p>11 a psychiatric problem is under 9.39 if</p> <p>12 that patient wants to go home?</p> <p>13 MR. LEE: Objection to form.</p> <p>14 MR. CALLAN: Objection to form.</p> <p>15 MR. RADOMISLI: Objection to</p> <p>16 form.</p> <p>17 A. Rephrase your question.</p> <p>18 Q. Sure. I will rephrase it.</p> <p>19 You say when a person is in the</p> <p>20 medical emergency room, they can be held.</p> <p>21 What does that mean?</p> <p>22 A. If let's say the medical doctor</p> <p>23 will ask for a consult, he needs a psych</p> <p>24 consult because let's say that patient is</p> <p>25 behaving bizarre or may be agitated in</p>

20 (Pages 74 - 77)



<p style="text-align: right;">Page 78</p> <p>1 L. ALDANA-BERNIER</p> <p>2 the ER or if they have a past history of</p> <p>3 psychiatric illness, then that doctor</p> <p>4 will call for a psychiatrist to come and</p> <p>5 see the patient.</p> <p>6 If the psychiatrist thinks that</p> <p>7 the patient needs to be transferred to</p> <p>8 the psychiatric department, then we can</p> <p>9 hold the patient and transfer that</p> <p>10 patient to the psychiatric unit.</p> <p>11 Q. Under what regulation, rule, or</p> <p>12 standard can you hold the patient that</p> <p>13 you're aware of that you just described?</p> <p>14 A. There is no 9.39, it's the</p> <p>15 decision of the psychiatrist to transfer.</p> <p>16 That's the medical ER. Usually, in the</p> <p>17 medical ER you cannot handle the patient</p> <p>18 that has all of these symptoms that I was</p> <p>19 talking about: bizarre behavior,</p> <p>20 violent, unpredictable, delusional.</p> <p>21 They can't handled those types</p> <p>22 of patients. They tend to transfer that</p> <p>23 patient to the psychiatric unit for</p> <p>24 further stabilization of the psychiatric</p> <p>25 problem.</p>	<p style="text-align: right;">Page 80</p> <p>1 L. ALDANA-BERNIER</p> <p>2 understand it in order to admit a patient</p> <p>3 against their will under that section?</p> <p>4 A. If we know that the patient</p> <p>5 need admission because they are a danger</p> <p>6 to themselves or a danger to society; if</p> <p>7 they are psychotic and not able to take</p> <p>8 care of themselves; if they were</p> <p>9 depressed; if they were suicidal, then we</p> <p>10 make that decision that the patient needs</p> <p>11 to be admitted even if it's against their</p> <p>12 will.</p> <p>13 Q. This assessment that you just</p> <p>14 said has to be made, is that the kind of</p> <p>15 assessment we talked about earlier: the</p> <p>16 mental status examination?</p> <p>17 A. Yes. Yes.</p> <p>18 Q. And when a person is depressed,</p> <p>19 when you say they could be held, what do</p> <p>20 you mean?</p> <p>21 A. They could be held?</p> <p>22 Q. Yeah, because they are</p> <p>23 depressed?</p> <p>24 A. When they were depressed and</p> <p>25 not able to take care of themselves, then</p>
<p style="text-align: right;">Page 79</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. I'm going to ask my question</p> <p>3 again. Maybe I'm not being clear.</p> <p>4 Under what rules, standard, or</p> <p>5 law can a patient be held in a medical</p> <p>6 emergency room pending transfer to the</p> <p>7 psychiatric emergency room for evaluation</p> <p>8 of the Mental Hygiene Law 9.39, if you</p> <p>9 are aware of any?</p> <p>10 A. I'm not aware of any.</p> <p>11 Q. Am I correct that Section 9.39</p> <p>12 of the Mental Hygiene Law as you</p> <p>13 understand it must be complied with in</p> <p>14 order to hold a patient for psychiatric</p> <p>15 reasons against their will?</p> <p>16 MR. LEE: Objection to form.</p> <p>17 A. That is for when you admit the</p> <p>18 patient?</p> <p>19 Q. Yes.</p> <p>20 A. 9.39.</p> <p>21 Q. That's your understanding?</p> <p>22 A. Yes, that's against the rule,</p> <p>23 yes.</p> <p>24 Q. What is required by Section</p> <p>25 9.39 of the Mental Hygiene Law as you</p>	<p style="text-align: right;">Page 81</p> <p>1 L. ALDANA-BERNIER</p> <p>2 that would be considered also a danger to</p> <p>3 themselves because they were depressed.</p> <p>4 They are not functioning, not eating.</p> <p>5 They could be suicidal. They were not</p> <p>6 maybe functioning, to bare minimum. They</p> <p>7 are not sleeping, not eating. This is</p> <p>8 also considered a danger to themselves so</p> <p>9 they have to be admitted.</p> <p>10 Q. Are there certain procedures</p> <p>11 that must be followed in order to comply</p> <p>12 with 9.39 as you understand it?</p> <p>13 A. Patient not able to take care</p> <p>14 of themselves then we are supposed to</p> <p>15 admit these patients.</p> <p>16 Q. As a physician are there</p> <p>17 certain things that you are supposed to</p> <p>18 do in order to comply with Section 9.39</p> <p>19 of the Mental Hygiene Law as you</p> <p>20 understand it?</p> <p>21 A. Yes, I have to admit this</p> <p>22 patient. They are depressed.</p> <p>23 Q. That's all you have to do is</p> <p>24 admit them?</p> <p>25 A. I have to admit them, observe</p>

21 (Pages 78 - 81)

<p style="text-align: right;">Page 82</p> <p>1 L. ALDANA-BERNIER</p> <p>2 them, stabilize them, medicate them.</p> <p>3 Q. Anything else that you have to</p> <p>4 do?</p> <p>5 A. Anything else. I have to</p> <p>6 stabilize, medicate. I have to admit. I</p> <p>7 have to obtain information from previous</p> <p>8 records.</p> <p>9 Q. What kind of previous records,</p> <p>10 you mean the hospital records?</p> <p>11 A. Yes. If they have a</p> <p>12 psychiatrist, I have to call them.</p> <p>13 Q. If they have a psychiatrist,</p> <p>14 you have to call them?</p> <p>15 A. If they have a psychiatrist,</p> <p>16 yes.</p> <p>17 Q. What about any other doctor, do</p> <p>18 you have to call those doctors?</p> <p>19 A. Only the psychiatrist.</p> <p>20 If they say they want us to</p> <p>21 call their medical doctor, yes, we call</p> <p>22 their medical doctor.</p> <p>23 Q. Did you have to fill out any</p> <p>24 form?</p> <p>25 A. Yes, release of information,</p>	<p style="text-align: right;">Page 84</p> <p>1 L. ALDANA-BERNIER</p> <p>2 stabilized in a hospital.</p> <p>3 Q. It's for your own benefit?</p> <p>4 A. No.</p> <p>5 MR. CALLAN: Objection to form.</p> <p>6 You're recharacterizing her answers.</p> <p>7 MR. SUCKLE: I'm asking.</p> <p>8 A. It's not for my benefit.</p> <p>9 Q. Whose benefit is it for?</p> <p>10 A. For the benefit of the whole</p> <p>11 society as well as the patient and whole</p> <p>12 society.</p> <p>13 Q. Is it important to be accurate</p> <p>14 in your recordkeeping in a hospital</p> <p>15 chart?</p> <p>16 A. Repeat the question.</p> <p>17 Q. Is it important to be accurate</p> <p>18 in your recordkeeping and note keeping in</p> <p>19 a hospital chart?</p> <p>20 A. Yes.</p> <p>21 Q. As a physician?</p> <p>22 A. Yes.</p> <p>23 Q. Why?</p> <p>24 A. It's for the sake of patient.</p> <p>25 MR. SUCKLE: Do you need to take</p>
<p style="text-align: right;">Page 83</p> <p>1 L. ALDANA-BERNIER</p> <p>2 yes.</p> <p>3 Q. In order to comply with Section</p> <p>4 9.39 of the Mental Hygiene Law, you have</p> <p>5 to fill out a release of information</p> <p>6 form?</p> <p>7 A. I have to go back. I'm sorry.</p> <p>8 In the emergency room, we do</p> <p>9 not get release of information, only in</p> <p>10 the inpatient unit.</p> <p>11 Q. Did you ever fill out any form</p> <p>12 in order to comply with Section 9.39 of</p> <p>13 the Mental Hygiene Law, as you understand</p> <p>14 it?</p> <p>15 A. Just those forms, the 9.39</p> <p>16 form.</p> <p>17 Q. What are those forms for?</p> <p>18 A. Those are legal forms.</p> <p>19 Q. What is the purpose of those</p> <p>20 legal forms, do you know, as you</p> <p>21 understand it?</p> <p>22 A. The purpose of those legal</p> <p>23 forms is just for the reason that you</p> <p>24 think: if the patient is a danger to</p> <p>25 himself and that he needs to be</p>	<p style="text-align: right;">Page 85</p> <p>1 L. ALDANA-BERNIER</p> <p>2 a break?</p> <p>3 THE REPORTER: No.</p> <p>4 MR. SMITH: Let's take a break.</p> <p>5 We are going off the record at</p> <p>6 11:51.</p> <p>7 [Discussion held off the</p> <p>8 record.]</p> <p>9 [Whereupon, at 11:51 a.m., a</p> <p>10 recess was taken.]</p> <p>11 [Whereupon, at 12:13 p.m., the</p> <p>12 testimony continued.]</p> <p>13 MR. SMITH: Back on the record</p> <p>14 12:13.</p> <p>15 Q. Doctor, you had indicated to us</p> <p>16 your first note in the chart was November</p> <p>17 2nd, 2009, at 3:10 p.m.</p> <p>18 And do you know whether or not</p> <p>19 the patient had been evaluated from a</p> <p>20 psychiatric prospective at any time prior</p> <p>21 to your note?</p> <p>22 A. You're asking me if --</p> <p>23 Q. I'm asking do you know whether</p> <p>24 or not the patient had to be evaluated</p> <p>25 from a psychiatric prospective at any</p>

22 (Pages 82 - 85)

<p style="text-align: right;">Page 86</p> <p>1 L. ALDANA-BERNIER  2 time prior to November 2, 2009, at any  3 time before you made your note?  4 A. Yes.  5 Q. Did you review the chart of Mr.  6 Schoolcraft prior to seeing him on  7 November 2nd, 2009, at 3:10 p.m.?  8 A. Yes.  9 Q. Why did you do that?  10 A. To be able to know the patient  11 and see what's going on and get  12 information about the patient.  13 Q. And when for the first time did  14 anybody do any kind of psychiatric  15 examination or assessment of Mr.  16 Schoolcraft in Jamaica Hospital that  17 you're aware of?  18 A. That is when he was in the  19 medical ER.  20 Q. And did you see a note of that  21 evaluation?  22 A. Yes, it's here [indicating].  23 Q. What is the date and time of  24 that note?  25 A. It's 11/1/2009 at 6:30 in the</p>	<p style="text-align: right;">Page 88</p> <p>1 L. ALDANA-BERNIER  2 A. When the doctor calls for a  3 consult, this is the form that we use to  4 write our notes.  5 Q. What was the purpose of having  6 Mr. Schoolcraft evaluated, if you recall,  7 from your review of the chart?  8 A. Okay. It said in here that a  9 psych consult was called and reported as  10 patient was acting bizarre.  11 Q. Did you read this note prior to  12 your evaluation of the patient?  13 A. Yes.  14 Q. Is this one of notes that you  15 read prior to coming here to testify in  16 preparation for your testimony today?  17 A. Yes.  18 Q. And were you able to read the  19 note, the handwriting, when you read  20 it --  21 A. Yes.  22 Q. -- back in 2009?  23 A. Yes.  24 Q. Have you seen Dr. Lewin's  25 handwriting before?</p>
<p style="text-align: right;">Page 87</p> <p>1 L. ALDANA-BERNIER  2 morning.  3 MR. LEE: At what time?  4 THE REPORTER: 6:30 in the  5 morning.  6 MR. SUCKLE: Just give me a  7 second.  8 MR. SMITH: Did you see 11/1?  9 THE WITNESS: Yes, 11/1/2009 at  10 6:30 in the morning.  11 Q. And this is a note by who?  12 A. Dr. Lewin.  13 Q. Spell that?  14 A. L-E-W-I-N.  15 Q. It says 1 of 3 on top, correct?  16 A. Yes.  17 Q. It's a three-page note,  18 correct?  19 A. Yes.  20 Q. And it ends and the three pages  21 end with a note on 11/1/09 at 6:30 a.m.,  22 correct?  23 A. Yes.  24 Q. This is called a "Consultation  25 Form." What is that?</p>	<p style="text-align: right;">Page 89</p> <p>1 L. ALDANA-BERNIER  2 A. Yes.  3 Q. And you had become familiar  4 with it?  5 A. Yes.  6 Q. And if you go to the second  7 page of that note, did you see from that  8 note there had been no prior psychiatric  9 history?  10 A. It says in here, "Denied past  11 psych hospitalization or treatment."  12 Q. Or suicidal attempt?  13 A. Yes.  14 Q. And after this note was  15 written, was Mr. Schoolcraft free to go  16 home?  17 A. After this note was written,  18 she had recommendations.  19 Q. I know. But my question was:  20 Was Mr. Schoolcraft free to go home after  21 that note was written?  22 A. No.  23 Q. When you say "no," why not?  24 A. Because then that was her  25 recommendation he needed one-to-one</p>

23 (Pages 86 - 89)

<p style="text-align: right;">Page 90</p> <p>1 L. ALDANA-BERNIER</p> <p>2 observation for unpredictable behavior</p> <p>3 and escape risk.</p> <p>4 Q. What was he escaping from, what</p> <p>5 was the escape risk from?</p> <p>6 A. He might run out of the</p> <p>7 emergency room because it's unlocked</p> <p>8 door.</p> <p>9 Q. He needed to be held because he</p> <p>10 was an escape risk?</p> <p>11 A. He needed to be observed more.</p> <p>12 Q. He needed to be observed more?</p> <p>13 A. One-to-one, yes.</p> <p>14 Q. Did you also read in the note</p> <p>15 on the second page, the last line on the</p> <p>16 second page where the note reads, "He</p> <p>17 denies suicidal ideations." Do you see</p> <p>18 that?</p> <p>19 A. Yes.</p> <p>20 Q. And "He denies homicidal</p> <p>21 ideations."</p> <p>22 A. Yes.</p> <p>23 Q. Do you have any reason when you</p> <p>24 read that note to believe that wasn't</p> <p>25 true?</p>	<p style="text-align: right;">Page 92</p> <p>1 L. ALDANA-BERNIER</p> <p>2 is was behaving bizarre.</p> <p>3 Q. Just so I understand. He is</p> <p>4 been held because he is agitated?</p> <p>5 A. Yes.</p> <p>6 MR. CALLAN: Wait for the</p> <p>7 question.</p> <p>8 Q. He was being held because you</p> <p>9 want to know more about him, correct?</p> <p>10 MR. CALLAN: Objection to form</p> <p>11 of the question.</p> <p>12 Q. Is that correct?</p> <p>13 MR. CALLAN: That question</p> <p>14 doesn't make any sense. You are</p> <p>15 talking about --</p> <p>16 MR. SUCKLE: You have your</p> <p>17 objection.</p> <p>18 Q. Is that your understanding of</p> <p>19 the note?</p> <p>20 A. There was more to that. The</p> <p>21 patient was behaving bizarre.</p> <p>22 Q. What action was he taking that</p> <p>23 was bizarre?</p> <p>24 A. According to the note, when</p> <p>25 they went to his house, the patient</p>
<p style="text-align: right;">Page 91</p> <p>1 L. ALDANA-BERNIER</p> <p>2 MR. LEE: Objection to form.</p> <p>3 A. But you are missing the point</p> <p>4 in there when he is paranoid about his</p> <p>5 supervisors.</p> <p>6 Q. I asked you whether you had any</p> <p>7 reason to believe he was not suicidal and</p> <p>8 not homicidal?</p> <p>9 A. I think I need to know further</p> <p>10 if he was suicidal or homicidal. At that</p> <p>11 point in time, I need to assess suicidal</p> <p>12 or homicidal.</p> <p>13 Q. You didn't have enough</p> <p>14 information by just reading suicidal or</p> <p>15 homicidal, correct, you needed more</p> <p>16 information, correct?</p> <p>17 A. Yes, it's saying here he was</p> <p>18 paranoid about his supervisors.</p> <p>19 MR. CALLAN: Objection to form.</p> <p>20 Q. So he was being held because he</p> <p>21 was paranoid?</p> <p>22 A. Not only that. He became</p> <p>23 agitated, uncooperative, verbally abusive</p> <p>24 while he was in the medical ER so we have</p> <p>25 to find out why there is agitation, why</p>	<p style="text-align: right;">Page 93</p> <p>1 L. ALDANA-BERNIER</p> <p>2 barricaded himself and he will not open</p> <p>3 the door so they had to break into his</p> <p>4 apartment.</p> <p>5 Q. Is it your understanding under</p> <p>6 9.39 of the Mental Hygiene Law, someone</p> <p>7 can be held because they are acting</p> <p>8 bizarre?</p> <p>9 MR. CALLAN: Objection to form.</p> <p>10 MR. LEE: Objection to form.</p> <p>11 Q. Is that your understanding?</p> <p>12 A. That's my -- he can be bizarre</p> <p>13 and he can be psychotic.</p> <p>14 Q. The question was: Is it your</p> <p>15 understanding of 9.39 of the Mental</p> <p>16 Hygiene Law that a patient could be held</p> <p>17 because they're acting bizarre?</p> <p>18 MR. LEE: Objection to form.</p> <p>19 A. He can be a danger to himself.</p> <p>20 Q. You have to answer my question.</p> <p>21 Can a patient be held under</p> <p>22 Section 9.39 of the Mental Hygiene Law</p> <p>23 because they are acting bizarre?</p> <p>24 A. Yes.</p> <p>25 Q. Can they be held under Mental</p>

24 (Pages 90 - 93)

<p style="text-align: right;">Page 94</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Hygiene Law 9.39, as you understand it,</p> <p>3 because they are agitated?</p> <p>4 A. Yes.</p> <p>5 Q. That's your understanding of</p> <p>6 the law?</p> <p>7 MR. CALLAN: Objection to the</p> <p>8 form of the question.</p> <p>9 Q. Correct?</p> <p>10 A. [No response.]</p> <p>11 Q. Am I correct that's your</p> <p>12 understanding?</p> <p>13 A. My understanding, yes.</p> <p>14 Q. So a good and accepted medical</p> <p>15 practice as you understand it allowed to</p> <p>16 make a hospital to hold Mr. Schoolcraft</p> <p>17 on November 1, 2009, 'cause he was acting</p> <p>18 bizarre, correct?</p> <p>19 MR. CALLAN: Objection to form.</p> <p>20 MR. LEE: Objection to the form.</p> <p>21 Q. Correct?</p> <p>22 A. It's not only the behaving</p> <p>23 bizarre. It's the whole picture that was</p> <p>24 going on at the time. From the --</p> <p>25 Q. Did you see anything in this</p>	<p style="text-align: right;">Page 96</p> <p>1 L. ALDANA-BERNIER</p> <p>2 that he was going to hurt himself. There</p> <p>3 is nothing that he was going to hurt</p> <p>4 himself.</p> <p>5 Q. Or hurt anybody else, correct?</p> <p>6 A. Nope.</p> <p>7 Q. Do you know the physician, the</p> <p>8 psychiatric resident, that signed that</p> <p>9 note?</p> <p>10 A. That is Dr. Lewin. The</p> <p>11 resident was Dr. Lewin, and the attending</p> <p>12 Dr. Patel.</p> <p>13 Q. On the last page of that note,</p> <p>14 it's a three-page note, is there a stamp</p> <p>15 there for the resident?</p> <p>16 A. Yes.</p> <p>17 Q. So Dr. Lewin was a resident?</p> <p>18 A. Yes.</p> <p>19 Q. And did Dr. Lewin provide any</p> <p>20 notice to Mr. Schoolcraft under 9.39 of</p> <p>21 the Mental Hygiene Law?</p> <p>22 MR. RADOMISLI: Objection.</p> <p>23 A. I would not remember that.</p> <p>24 Q. Did Dr. Lewin, from your review</p> <p>25 of the records, produce any forms, signed</p>
<p style="text-align: right;">Page 95</p> <p>1 L. ALDANA-BERNIER</p> <p>2 note that Mr. Schoolcraft was exhibiting</p> <p>3 a threat to another person?</p> <p>4 A. Not a threat to another person.</p> <p>5 Q. Did you see anywhere in here</p> <p>6 that he was suicidal?</p> <p>7 A. He is not suicidal.</p> <p>8 Q. Did you see anywhere in here</p> <p>9 that he was going to harm himself in any</p> <p>10 way?</p> <p>11 A. That I have to question if he</p> <p>12 was going to hurt himself or if he was a</p> <p>13 danger to himself because if I have</p> <p>14 somebody in the emergency room, you have</p> <p>15 a report that he was behaving bizarre or</p> <p>16 he was agitated, and if I look at the</p> <p>17 whole picture from the time that he was</p> <p>18 taken away from his home where he was --</p> <p>19 he barricaded himself, then I have to</p> <p>20 consider him to be held against his will.</p> <p>21 Q. Did you see anything in this</p> <p>22 record that Mr. Schoolcraft indicated to</p> <p>23 the consulting physician that he was</p> <p>24 going to harm himself?</p> <p>25 A. He said in here that he denied</p>	<p style="text-align: right;">Page 97</p> <p>1 L. ALDANA-BERNIER</p> <p>2 any form, under 9.39 of the Mental</p> <p>3 Hygiene Law in order to admit Mr.</p> <p>4 Schoolcraft against his will?</p> <p>5 MR. RADOMISLI: Objection.</p> <p>6 Q. Did you see any form?</p> <p>7 MR. RADOMISLI: Objection.</p> <p>8 MR. CALLAN: Objection.</p> <p>9 Q. Did he fill out any such form?</p> <p>10 MR. CALLAN: She is supposed to</p> <p>11 get into his mind and know what he</p> <p>12 did?</p> <p>13 MR. SUCKLE: Forms, forms, did</p> <p>14 you see any forms.</p> <p>15 MR. CALLAN: Did you see any</p> <p>16 forms, that's fine.</p> <p>17 Go right ahead.</p> <p>18 A. No.</p> <p>19 Q. Is there anything in the file</p> <p>20 that suggests that Dr. Lewin actually</p> <p>21 filled out any form with regard to 9.39</p> <p>22 of the Mental Hygiene Law?</p> <p>23 MR. RADOMISLI: Objection.</p> <p>24 Q. Anything to suggest that?</p> <p>25 MR. RADOMISLI: Objection.</p>

25 (Pages 94 - 97)

<p style="text-align: right;">Page 98</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. From your prospective?</p> <p>3 MR. RADOMISLI: Objection.</p> <p>4 MR. SUCKLE: I heard it.</p> <p>5 MR. RADOMISLI: I strenuously</p> <p>6 object.</p> <p>7 MR. SUCKLE: I heard your</p> <p>8 strenuous objection.</p> <p>9 MR. CALLAN: Do you want her to</p> <p>10 look through the entire record?</p> <p>11 A. There are no forms.</p> <p>12 Q. Did Dr. Lewin, do you see</p> <p>13 anything to suggest that Dr. Lewin then</p> <p>14 ensured within 48 hours that another</p> <p>15 physician evaluated Mr. Schoolcraft?</p> <p>16 MR. RADOMISLI: Objection.</p> <p>17 MR. CALLAN: Objection.</p> <p>18 Q. Does it say anything in there?</p> <p>19 A. She indicated in here he needs</p> <p>20 to be transferred to the psych ER.</p> <p>21 Q. And after Dr. Lewin, there is</p> <p>22 another signature. Do you know who that</p> <p>23 is? Did I ask you that already?</p> <p>24 In the note of November 1, that</p> <p>25 Dr. Lewin wrote, underneath his signature</p>	<p style="text-align: right;">Page 100</p> <p>1 L. ALDANA-BERNIER</p> <p>2 symptoms, like, agitation, aggressive</p> <p>3 behavior, delusions, hallucinations,</p> <p>4 impairment in reality testing.</p> <p>5 Q. That's a pretty broad category,</p> <p>6 correct?</p> <p>7 A. Yes.</p> <p>8 Q. What does Axis I stand for?</p> <p>9 A. Those are our DSM categories</p> <p>10 when we are diagnosing patients.</p> <p>11 Axis I is for psychotic</p> <p>12 disorders or mental health disorders.</p> <p>13 Axis II would be our personality</p> <p>14 disorder. Axis III is the medical</p> <p>15 disorder. Axis IV is the social</p> <p>16 stressor. And Axis V is the global</p> <p>17 functioning.</p> <p>18 Q. So when you read that note, you</p> <p>19 learned that there was some social</p> <p>20 stressors; being, a conflict at the</p> <p>21 worksite for Mr. Schoolcraft, correct?</p> <p>22 A. That's correct.</p> <p>23 Q. Do you know what the nature of</p> <p>24 a that conflict was?</p> <p>25 A. Something -- a conflict between</p>
<p style="text-align: right;">Page 99</p> <p>1 L. ALDANA-BERNIER</p> <p>2 is another signature. Do you know whose</p> <p>3 signature that is?</p> <p>4 A. That is Dr. Patel.</p> <p>5 Q. Did Dr. Patel fill out any form</p> <p>6 that you are aware of in order to comply</p> <p>7 with 9.39 of the Mental Hygiene Law?</p> <p>8 MR. LEE: Objection to form.</p> <p>9 MR. RADOMISLI: Objection.</p> <p>10 MR. CALLAN: Same objection.</p> <p>11 Q. No?</p> <p>12 A. There is no form in here.</p> <p>13 Q. There is no form in the record,</p> <p>14 correct?</p> <p>15 A. None.</p> <p>16 Q. Did you read Dr. Patel's note</p> <p>17 at the end there where he signed?</p> <p>18 A. "I concur with above doctor's</p> <p>19 treatment recommendations."</p> <p>20 Q. What is psychotic disorder,</p> <p>21 what is that?</p> <p>22 A. Psychotic disorder is one of</p> <p>23 the categories of diagnosis wherein</p> <p>24 patient is not in touch with reality.</p> <p>25 He can have the following</p>	<p style="text-align: right;">Page 101</p> <p>1 L. ALDANA-BERNIER</p> <p>2 his supervisor and himself.</p> <p>3 Q. Am I correct that up until this</p> <p>4 note that nobody at Jamaica Hospital had</p> <p>5 attempted to admit Mr. Schoolcraft under</p> <p>6 9.39 of the Mental Hygiene Law, correct?</p> <p>7 MR. CALLAN: Objection to the</p> <p>8 form of the question.</p> <p>9 MR. LEE: Likewise.</p> <p>10 A. Can you say that again?</p> <p>11 Q. Prior to this note of November</p> <p>12 1, 2009, at 6:30 a.m. and from your</p> <p>13 review of the records, nobody at Jamaica</p> <p>14 Hospital had attempted to admit Mr.</p> <p>15 Schoolcraft under 9.39 of the Mental</p> <p>16 Hygiene Law up to that point, correct?</p> <p>17 MR. RADOMISLI: Objection to</p> <p>18 form.</p> <p>19 MR. CALLAN: Same objection.</p> <p>20 MR. LEE: Me too.</p> <p>21 MR. RADOMISLI: Can you rephrase</p> <p>22 the question?</p> <p>23 MR. SUCKLE: I think it's</p> <p>24 perfectly fine.</p> <p>25 MR. RADOMISLI: You can say</p>

26 (Pages 98 - 101)



<p style="text-align: right;">Page 102</p> <p>1 L. ALDANA-BERNIER 2 prior to. 3 MR. SUCKLE: I think I just did. 4 MR. RADOMISLI: No. You're 5 referring to your note. You're 6 characterizing the note in a certain 7 way. 8 Q. Prior to 6:30 on November 1, 9 2009, had anyone at Jamaica Hospital 10 attempted to admit Mr. Schoolcraft 11 pursuant to Section 9.39 of the Mental 12 Hygiene Law? 13 MR. CALLAN: Objection. How 14 would she know five years before it 15 happened? Are you talking about the 16 records she has in front of her? 17 Q. From your review of the 18 records? 19 MR. CALLAN: Which record? 20 MR. SMITH: The record should 21 reflect, the Witness has the entire -- 22 MR. SUCKLE: We've already done 23 this, Counsel. It's on the record 24 she's reading from Exhibit 69. 25 MR. CALLAN: You can specify</p>	<p style="text-align: right;">Page 104</p> <p>1 L. ALDANA-BERNIER 2 A. Referring to this admission? 3 Q. Yes. 4 A. She want the patient 5 transferred to the psych ER. That is an 6 admission to the psych ER. 7 Q. The question is: Did anybody 8 try to admit Mr. Schoolcraft pursuant to 9 Section 9.39 of the Mental Hygiene Law 10 prior to 6:30 in the morning from your 11 review of Mr. Schoolcraft's chart? 12 A. This alone is admission to the 13 psych ER, transfer to the psych ER after 14 medical clearance. From there she 15 admitted the patient to the psych ER. 16 Q. The question was "did they 17 invoke Section 9.39 of the Mental Hygiene 18 Law at any time prior to 6:30 in the 19 morning? 20 MR. CALLAN: Objection to the 21 form of the question. 22 MR. RADOMISLI: Objection to the 23 form. 24 Q. Did anybody try to admit Mr. 25 Schoolcraft pursuant to 9.39 of the</p>
<p style="text-align: right;">Page 103</p> <p>1 L. ALDANA-BERNIER 2 that. 3 MR. SUCKLE: We were talking 4 about it and she's testified to it. 5 MR. CALLAN: Just because we 6 were talking about it does not mean 7 that is what a specific question is 8 referring to. 9 MR. SUCKLE: Every question has 10 been asked about the record she has in 11 front of her. If you think there is a 12 problem here, we will be asking it 13 that way every time. 14 MR. CALLAN: There is a way to 15 correctly ask the question. I'm just 16 asking that you answer it correctly. 17 You can answer if he is talking 18 about this record. 19 MR. SUCKLE: Of course. 20 Q. In your review of the record 21 that you have sitting in front of you, 22 has anybody at Jamaica Hospital ever 23 during this admission tried to admit Mr. 24 Schoolcraft pursuant to Section 9.39 of 25 the Mental Hygiene Law?</p>	<p style="text-align: right;">Page 105</p> <p>1 L. ALDANA-BERNIER 2 Mental Hygiene Law prior to 6:30 in the 3 morning at Jamaica Hospital based on your 4 view of the Jamaica Hospital chart you 5 have in front of you? 6 A. Once they transferred to the 7 psych ER, that patient is admitted to the 8 psych emergency room. 9 Q. Is every patient admitted to 10 the psych emergency room admitted 11 pursuant to Section 9.39? 12 A. To the emergency room, yes. 13 Q. So every patient that goes to 14 the psych emergency room is admitted from 15 your understanding pursuant to 9.39 of 16 the Mental Hygiene Law? 17 A. I think you are using that 9.39 18 in the wrong way. 9.39 is when a patient 19 is admitted to inpatient unit. When the 20 patient is a transferred to psych ER, we 21 don't use 9.39. 22 If the patient needs further 23 treatment in the psych ER, then we 24 transferred to the psych ER. 25 Q. So the answer is no, no one</p>

27 (Pages 102 - 105)

<p style="text-align: right;">Page 106</p> <p>1 L. ALDANA-BERNIER 2 tried to admit Mr. Schoolcraft pursuant 3 to 9.39 -- 4 A. But you're using it in the 5 wrong way. 6 Q. I just want to know whether or 7 not anybody tried to admit -- 8 MR. CALLAN: She's answered the 9 question three times. 10 MR. SUCKLE: No, she hasn't. 11 MR. CALLAN: What do you think, 12 people get teleported? They have to 13 be evaluated. 14 MR. SUCKLE: Keep your 15 objections as to form as the rules 16 require. 17 MR. CALLAN: You don't seem to 18 get it when an objection to form is 19 made. She's answered it three times. 20 MR. SUCKLE: She's not answered 21 it once. 22 THE WITNESS: That's my answer. 23 MR. CALLAN: Do you think they 24 teleport -- 25 MR. SUCKLE: No more speaking</p>	<p style="text-align: right;">Page 108</p> <p>1 L. ALDANA-BERNIER 2 Q. Are you the first physician 3 that made that decision? 4 A. Yes, I was. 5 Q. And is that the first time when 6 you made the decision that somebody 7 attempted to comply with Section 9.39 of 8 the Mental Hygiene Law in order to admit 9 Mr. Schoolcraft? 10 MR. RADOMISLI: Objection to 11 form. 12 A. Was it the first time? 13 Q. Yes. 14 Was your conduct the first 15 effort on behalf of Jamaica Hospital to 16 admit him pursuant to Section 9.39 of 17 Mental Hygiene Law -- 18 MR. CALLAN: Objection to form. 19 Q. -- per your evaluation? 20 A. I was the one that did the 21 9.39. 22 Q. Were there any other 23 evaluations of Mr. Schoolcraft from the 24 psychiatric perspective prior to your 25 note of November 2nd, 2009, at 3:10 p.m.</p>
<p style="text-align: right;">Page 107</p> <p>1 L. ALDANA-BERNIER 2 objections. Should we just call 3 Justice Sweet? 4 MR. CALLAN: -- inpatient 5 treatment or do they have to be 6 evaluated? 7 MR. SUCKLE: You're speaking on 8 the record in violation of the rules. 9 MR. CALLAN: Make the call. Be 10 my guest. 11 Q. Was Mr. Schoolcraft admitted 12 pursuant to 9.39 of the Mental Hygiene 13 Law at any time during his admission to 14 Jamaica Hospital? 15 A. The patient was transferred to 16 the psych ER. 17 Q. I know. 18 Was he ever admitted pursuant 19 to Section 9.39 of the Mental Hygiene Law 20 at any time during his admission in 21 October and November 2009 pursuant to 22 Section 9.39? 23 A. I did it myself when he was in 24 the psych ER. I made that decision he 25 was admitted.</p>	<p style="text-align: right;">Page 109</p> <p>1 L. ALDANA-BERNIER 2 A. Yes, the notes of 11/1/09 at 12 3 p.m. 4 Q. Did you review this November 1, 5 2009, 12 p.m. note prior to writing your 6 note on November 2nd, 2009, at 10 p.m. -- 7 A. Yes. 8 MR. CALLAN: 11/1/09 at 12 p.m. 9 is the note. 10 Q. Did you review this note prior 11 to you writing your note of November 2nd? 12 MR. LEE: Objection. 13 Off the record. 14 [Discussion held off the 15 record.] 16 MR. SMITH: Let me shut this 17 off. 18 [Whereupon, at 12:42 p.m., a 19 recess was taken.] 20 [Whereupon, at 12:43 p.m., the 21 testimony continued.] 22 MR. CALLAN: My client is 23 looking at a page that has at the top 24 11/1/09, time 12 p.m., Jamaica 25 Hospital Medical Center. She's</p>

28 (Pages 106 - 109)

<p style="text-align: right;">Page 110</p> <p>1 L. ALDANA-BERNIER</p> <p>2 looking at that at the top of the</p> <p>3 page.</p> <p>4 Take if from there, Counsel.</p> <p>5 Q. The note that counsel described</p> <p>6 as the first page, do you know how many</p> <p>7 pages that is in the record?</p> <p>8 A. Seven pages.</p> <p>9 Q. Is the last page of that note</p> <p>10 the psychiatrist's name with a stamp Dr.</p> <p>11 Tariq, is that the last page of that</p> <p>12 note?</p> <p>13 A. Yes.</p> <p>14 Q. Who is Dr. Tariq, do you know?</p> <p>15 A. He was the resident.</p> <p>16 Q. Medical resident, psychiatric</p> <p>17 resident?</p> <p>18 A. Psychiatric resident.</p> <p>19 Q. And just since you're on the</p> <p>20 page, you wrote "disposition," what does</p> <p>21 that mean?</p> <p>22 A. We have to decide whether we</p> <p>23 hold and stabilize the patient or</p> <p>24 discharge the patient.</p> <p>25 Q. Where was the patient</p>	<p style="text-align: right;">Page 112</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. [No response.]</p> <p>3 Q. Were the doors locked?</p> <p>4 A. Yes.</p> <p>5 Q. So the doors were locked?</p> <p>6 A. In the emergency room.</p> <p>7 Q. So when you are in the psych</p> <p>8 emergency room and someone says hold, the</p> <p>9 doors are locked and you can't get out?</p> <p>10 A. It means to say being kept in</p> <p>11 emergency room for further stabilization</p> <p>12 and admission.</p> <p>13 Q. Had Mr. Schoolcraft desired to</p> <p>14 leave, he wouldn't be able because the</p> <p>15 doors are locked, correct?</p> <p>16 A. No one can run out of the</p> <p>17 emergency room. The doors are locked.</p> <p>18 Q. Any other way that Mr.</p> <p>19 Schoolcraft was being held other than the</p> <p>20 doors being locked?</p> <p>21 A. Hold, I don't know how you are</p> <p>22 using hold. Hold is just to keep</p> <p>23 inpatients in the emergency room for</p> <p>24 further admission and stabilization.</p> <p>25 Q. He wasn't free to go home,</p>
<p style="text-align: right;">Page 111</p> <p>1 L. ALDANA-BERNIER</p> <p>2 physically: Was he in the medical</p> <p>3 emergency room?</p> <p>4 A. He is in the psych ER.</p> <p>5 Q. At this point he was in the</p> <p>6 psych ER?</p> <p>7 A. Yes.</p> <p>8 Q. And at this point, what did Dr.</p> <p>9 Tariq write with regard to disposition?</p> <p>10 A. Hold and stabilize.</p> <p>11 Q. What does hold mean?</p> <p>12 A. When we hold the patient and</p> <p>13 stabilize the patient.</p> <p>14 Q. Was the patient free to leave?</p> <p>15 A. No. It said hold and</p> <p>16 stabilize.</p> <p>17 Q. Was he being held in</p> <p>18 restraints?</p> <p>19 A. Are you asking if the hold is</p> <p>20 in restraints or was the patient --</p> <p>21 Q. Was he physically being</p> <p>22 restrained at that point?</p> <p>23 A. I don't know.</p> <p>24 Q. What was physically preventing</p> <p>25 him from leaving?</p>	<p style="text-align: right;">Page 113</p> <p>1 L. ALDANA-BERNIER</p> <p>2 correct?</p> <p>3 A. Yes.</p> <p>4 Q. He was not?</p> <p>5 A. He was not discharged. That's</p> <p>6 why it says hold and stabilize.</p> <p>7 Q. Am I correct Dr. Tariq on the</p> <p>8 third written page on the second page of</p> <p>9 the printed form, there is a place called</p> <p>10 suicide attempts? Do you see that, there</p> <p>11 is a line that says, suicide attempts?</p> <p>12 A. Suicidal ideations?</p> <p>13 Q. Past psychiatric history, under</p> <p>14 past psychiatric history.</p> <p>15 A. Okay.</p> <p>16 Q. The box no suicide attempts in</p> <p>17 the past psychiatric history, correct?</p> <p>18 A. That's correct.</p> <p>19 Q. Under violence, no history of</p> <p>20 violence, correct?</p> <p>21 A. That's correct.</p> <p>22 Q. And in the chart actually</p> <p>23 immediately adjacent page actually the</p> <p>24 back of one of the forms, Dr. Tariq has</p> <p>25 written in the last paragraph, "Patient</p>

29 (Pages 110 - 113)

<p style="text-align: right;">Page 114</p> <p>1 L. ALDANA-BERNIER</p> <p>2 denies recent suicidal or homicidal</p> <p>3 thoughts," correct?</p> <p>4 A. That's correct.</p> <p>5 Q. And then when we talk about</p> <p>6 mental status exam -- part of this is a</p> <p>7 mental status exam. Do you see that part</p> <p>8 of the printed form, that's page 4 of the</p> <p>9 printed form?</p> <p>10 A. Uh-huh.</p> <p>11 Q. Yes?</p> <p>12 A. Yes.</p> <p>13 Q. Mental status, is that the</p> <p>14 mental status examination that you and I</p> <p>15 were talking about earlier today?</p> <p>16 A. Yes.</p> <p>17 Q. The same type of examination?</p> <p>18 A. Yes.</p> <p>19 Q. Here in response to questions,</p> <p>20 Mr. Schoolcraft has given some answers,</p> <p>21 correct?</p> <p>22 A. That's correct.</p> <p>23 Q. And those answers have been</p> <p>24 written down?</p> <p>25 A. That's correct.</p>	<p style="text-align: right;">Page 116</p> <p>1 L. ALDANA-BERNIER</p> <p>2 questioning of Mr. Schoolcraft during his</p> <p>3 mental status exam, he expressed no</p> <p>4 suicidal ideations, correct?</p> <p>5 MR. LEE: Objection to form.</p> <p>6 A. Correct.</p> <p>7 Q. No homicidal ideations,</p> <p>8 correct?</p> <p>9 A. Correct.</p> <p>10 Q. And no hallucinations, correct?</p> <p>11 A. Correct.</p> <p>12 Q. On the next printed form page</p> <p>13 5, what is that bar score?</p> <p>14 A. That is after. I think that's</p> <p>15 agitation rating score.</p> <p>16 Q. And 7 being highly agitated and</p> <p>17 1 not being agitated at all?</p> <p>18 A. Yes.</p> <p>19 Q. And Dr. Tariq wrote 1, which</p> <p>20 means not agitated at all, correct?</p> <p>21 A. Correct. At that time, he was</p> <p>22 not agitated at all.</p> <p>23 Q. At the time that Dr. Tariq</p> <p>24 evaluated him, the patient was not</p> <p>25 agitated at all; is that correct?</p>
<p style="text-align: right;">Page 115</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. And the doctor has had a chance</p> <p>3 to assess the patient as the patient sits</p> <p>4 in front of him?</p> <p>5 A. That's correct.</p> <p>6 Q. And the patient wrote down what</p> <p>7 he saw, correct?</p> <p>8 A. Correct.</p> <p>9 Q. That was Dr. Tariq that wrote</p> <p>10 that down, correct?</p> <p>11 A. Correct.</p> <p>12 Q. Under mental status, appearance</p> <p>13 and attitude, "cooperative at this time."</p> <p>14 Do you see that?</p> <p>15 A. Yes.</p> <p>16 Q. Do you have any reason to</p> <p>17 believe as you read that in 2009 that Mr.</p> <p>18 Schoolcraft was not being cooperative</p> <p>19 when Dr. Tariq made that evaluation?</p> <p>20 A. He wrote cooperative. He</p> <p>21 should be cooperative then.</p> <p>22 Q. Going down further, suicidal</p> <p>23 ideations, do you see that?</p> <p>24 A. Yes.</p> <p>25 Q. In response to Dr. Tariq's</p>	<p style="text-align: right;">Page 117</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. That's correct.</p> <p>3 Q. Going to the first page of Dr.</p> <p>4 Tariq's note, from the second line up,</p> <p>5 Dr. Tariq says he evaluates -- can you</p> <p>6 read that, the second line up what it</p> <p>7 says?</p> <p>8 A. As per ER consult?</p> <p>9 Q. The first page, second line up.</p> <p>10 A. As per ER consult?</p> <p>11 Q. Just before that. Can you read</p> <p>12 it, the beginning of that line?</p> <p>13 A. "He states that he was in bed</p> <p>14 last night. Landlord let NYPD officers</p> <p>15 in, assaulted him including bending his</p> <p>16 arm, stamping slightly on his face, and</p> <p>17 causing many bruises. Bruises are</p> <p>18 visible on both arms."</p> <p>19 Q. So Dr. Tariq is reporting from</p> <p>20 your understanding that Mr. Schoolcraft</p> <p>21 has bruises on both arms?</p> <p>22 A. Yeah. Yes.</p> <p>23 Q. Was there any other evaluation</p> <p>24 of Mr. Schoolcraft from the perspective</p> <p>25 of psychiatric examination prior to your</p>

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<p style="text-align: right;">Page 118</p> <p>1 L. ALDANA-BERNIER 2 note of November 2nd, 2009, 3:10? 3 A. There was an 11/2/2009 at 2:15. 4 Q. That's the note right above 5 your note? 6 A. Yes. 7 Q. Who is that by? 8 A. A resident Dr. Slowik, 9 S-L-O-W-I-K. 10 Q. Are you able to read that note? 11 A. "Patient seen and examined 12 today. Patient remains calm, withdrawn, 13 not violent or aggressive. 14 "Patient is guarded and not 15 cooperative. Patient keeps saying he 16 doesn't know why he came to this room and 17 forced him to go to the hospital. 18 "Patient doesn't know why he 19 cannot carry the guns, saying that they, 20 his supervisor -- he said I don't know. 21 Patient" -- 22 MR. CALLAN: Don't speak out 23 loud until you're ready because she 24 was taking down everything. All 25 right?</p>	<p style="text-align: right;">Page 120</p> <p>1 L. ALDANA-BERNIER 2 MR. CALLAN: Why don't you put 3 that in front of her so she can page 4 through? 5 MR. SUCKLE: Yeah. 6 It's dated 10/31/09. 7 MR. SMITH: Doctor, it's just 8 prior to the chart, about that far 9 into the chart [indicating]. Keep 10 going. The other way. 11 MR. CALLAN: Okay. All right. 12 She's got it. 13 Q. Did you review this record 14 prior -- 15 MR. CALLAN: Let's just identify 16 it. 17 MR. SUCKLE: Sure. 18 MR. CALLAN: Let the record 19 reflect, we're looking at medical 20 record 1298984, date 10/31/2009, and 21 it's a Jamaica Hospital Medical Center 22 Emergency Department record. Okay. 23 Q. Doctor, did you review this 24 record prior to making your note of 25 November 2nd, 2009?</p>
<p style="text-align: right;">Page 119</p> <p>1 L. ALDANA-BERNIER 2 If you can't read it, you can't 3 read it. 4 A. "Patient doesn't know why he 5 cannot carry the guns, saying that they, 6 his supervisor, did it to him, but he 7 said I don't know." 8 "He denies auditory or visual 9 hallucinations. Assessment and plan is 10 admit." 11 Q. Assess and admit, what does 12 that mean? 13 A. An assessment to admit. 14 Q. What does assessment mean? 15 A. That is her assessment, what 16 her notes are and the plans is to admit. 17 Q. Doctor, is there an emergency 18 room record from the medical emergency 19 room that I'll show you, this is the 20 record we are looking for [indicating]? 21 MR. LEE: Howard, can I see the 22 form? 23 MR. SUCKLE: [Handing.] 24 MR. LEE: Thank you. 25 THE WITNESS: Can I have it?</p>	<p style="text-align: right;">Page 121</p> <p>1 L. ALDANA-BERNIER 2 A. No. This is a medical record, 3 medical ER. This doesn't come to our ER. 4 Q. So the medical records aren't 5 in your possession in the psych ER? 6 A. No. 7 Q. Turning to the nursing 8 assessment in that form, the nurse's 9 notes. And this is again, October 31, 10 2009, and there are nursing notes. 11 Do you see that? 12 A. October 31? 13 Q. Yes. 14 Looking at the nursing note the 15 entry of -- do you have that in front of 16 you. 17 A. That's 11/1. 18 Q. The top of the page says 10/31, 19 but I'm looking at the note November 1st, 20 2009, at 2 a.m. 21 A. Yes. 22 Q. Do you see that? 23 A. [Indicating.] 24 Q. There is a note November 1, 25 2009, 2 a.m., do you see that, correct,</p>

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<p style="text-align: right;">Page 122</p> <p>1 L. ALDANA-BERNIER</p> <p>2 do you see that?</p> <p>3 A. Yes.</p> <p>4 Q. Doctor, when you wrote your</p> <p>5 note of November 2nd, 2009, did you know</p> <p>6 that a nurse noted "with redness on the</p> <p>7 right wrist with the handcuff, police</p> <p>8 officer made aware and requested to</p> <p>9 loosen a little bit yet refused."</p> <p>10 Did you know about that note</p> <p>11 when you made your note of November 2nd,</p> <p>12 2009?</p> <p>13 A. This is a medical ER note</p> <p>14 [indicating].</p> <p>15 Q. So you did not know?</p> <p>16 A. I didn't have that note.</p> <p>17 Q. Just so I'm clear: You did not</p> <p>18 know that a nurse had asked a police</p> <p>19 officer to loosen the handcuff, that the</p> <p>20 police officer refused, you did not know</p> <p>21 that?</p> <p>22 A. No, I did not know that.</p> <p>23 Q. Looking at that same note, the</p> <p>24 nurse's assessment, November 1st, 2009,</p> <p>25 5:54 a.m., do you see that note?</p>	<p style="text-align: right;">Page 124</p> <p>1 L. ALDANA-BERNIER</p> <p>2 redness to the wrist?</p> <p>3 MR. RADOMISLI: Objection.</p> <p>4 MR. LEE: Objection.</p> <p>5 MR. RADOMISLI: Also under</p> <p>6 Karbala [phonetic].</p> <p>7 MR. SUCKLE: This is prior, not</p> <p>8 subsequent.</p> <p>9 Q. Does good and accepted medical</p> <p>10 practice require the loosening --</p> <p>11 MR. CALLAN: This is a nursing</p> <p>12 question as well.</p> <p>13 Q. Does good and accepted medical</p> <p>14 practice require loosening of a handcuff</p> <p>15 causing redness to the wrist?</p> <p>16 MR. LEE: Objection.</p> <p>17 MR. CALLAN: Objection.</p> <p>18 You can answer if you can,</p> <p>19 Doctor. I mean is there a course in</p> <p>20 --</p> <p>21 MR. RADOMISLI: Objection.</p> <p>22 MR. CALLAN: Is there a course</p> <p>23 in medical school about handcuffs?</p> <p>24 MR. SMITH: You cannot coach the</p> <p>25 Witness. Cut it out.</p>
<p style="text-align: right;">Page 123</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. Yes.</p> <p>3 Q. Were you aware when you first</p> <p>4 saw Mr. Schoolcraft that he had reported</p> <p>5 to the nurse, "My wrist is numb, I don't</p> <p>6 feel anything now," did you know that</p> <p>7 when you wrote your note on November 2nd,</p> <p>8 2009?</p> <p>9 A. No, because I don't have this</p> <p>10 record.</p> <p>11 Q. Did you see that this note,</p> <p>12 that same note starts, "Psych consult in</p> <p>13 progress"?</p> <p>14 A. Yes.</p> <p>15 Q. Do you know whose psych consult</p> <p>16 that was, was that Dr. Tariq?</p> <p>17 A. No, this was Dr. Lewin.</p> <p>18 Q. And do you know if Dr. Lewin</p> <p>19 wrote or made a note that you saw</p> <p>20 regarding Mr. Schoolcraft's wrist being</p> <p>21 numb and he doesn't feel anything?</p> <p>22 A. She didn't write anything.</p> <p>23 Q. And Doctor, does good and</p> <p>24 accepted medical practice require</p> <p>25 loosening of a handcuff when it's causing</p>	<p style="text-align: right;">Page 125</p> <p>1 L. ALDANA-BERNIER</p> <p>2 MR. SUCKLE: We will attach this</p> <p>3 to our motion papers.</p> <p>4 MR. CALLAN: Bring that to Judge</p> <p>5 Sweet.</p> <p>6 MR. SUCKLE: So you are</p> <p>7 confident you can talk over us and</p> <p>8 make speaking objections? Is that</p> <p>9 your position, Counsel?</p> <p>10 MR. CALLAN: No. My position is</p> <p>11 that you have --</p> <p>12 MR. SUCKLE: Is that the</p> <p>13 disrespect that you have for the</p> <p>14 Court?</p> <p>15 MR. CALLAN: Ask relevant</p> <p>16 questions. You have been doing this</p> <p>17 long enough to know they do not teach</p> <p>18 you about handcuffs in medical school.</p> <p>19 MR. SMITH: You cannot coach the</p> <p>20 Witness. It's totally improper. It's</p> <p>21 completely wrong. You know it.</p> <p>22 Should we call the Court and ask</p> <p>23 them to tell you which you know you</p> <p>24 are not entitled to do. You are not a</p> <p>25 law department kid that just got --</p>

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<p style="text-align: right;">Page 126</p> <p>1 L. ALDANA-BERNIER  2 MR. SHAFFER: Objection.  3 MR. SMITH: Come on.  4 MR. CALLAN: I think that's a  5 smear on the law department of State  6 of New York.  7 Q. Does good and accepted medical  8 practice require that a handcuff be  9 loosened if it's causing redness to the  10 wrist?  11 MR. RADOMISLI: Objection.  12 MR. LEE: Objection.  13 MR. SUCKLE: You can answer.  14 MR. CALLAN: You can, Doctor, go  15 ahead.  16 A. If the patient complains, yes,  17 you have to release the restraints.  18 MR. RADOMISLI: Move to strike.  19 Q. When you say that you have to  20 release the restraints, what do you mean?  21 A. Loosen it.  22 Q. Going back to your previous  23 conversation about soft restraints, how  24 long had Mr. Schoolcraft been in the  25 hospital, if you know, prior to this note</p>	<p style="text-align: right;">Page 128</p> <p>1 L. ALDANA-BERNIER  2 November 1st, 2009, at 13:51. The last  3 entry is November 3rd, 2009, at 8:27.  4 Doctor, on November 1st, 2009,  5 at 15:38, did the nurse note that the  6 patient denied suicidal/homicidal  7 ideations?  8 A. Yes.  9 Q. Did you know when you wrote  10 your November 2nd, 2009 note?  11 A. No.  12 Q. On the same date November 1st,  13 2009, the nurse noted at 22:56, "Patient  14 denied suicidal/homicidal ideations."  15 A. These are medical records. I  16 wouldn't know.  17 Q. So you didn't know that when  18 you wrote your November 2nd, note,  19 correct?  20 A. That's correct.  21 Q. And again, November 2nd, 2009,  22 6:25, the nurse noted, denies suicidal,  23 slash, homicidal ideations. Did you know  24 about that note?  25 A. No.</p>
<p style="text-align: right;">Page 127</p> <p>1 L. ALDANA-BERNIER  2 of 2 a.m. on November 1st, 2009?  3 A. He was admitted, arrived at the  4 hospital 10/31/2009 at 23:03.  5 Q. So at this point, it had been  6 more than two hours he had been in the  7 hospital by the time of that note of 2  8 a.m., correct?  9 A. That's -- let me see, seven  10 hours.  11 MR. RADOMISLI: Sorry.  12 THE REPORTER: Seven hours.  13 Q. Doctor, continuing on the  14 further nursing notes, here's the page I  15 am referring to. Can you find that in  16 the hospital record?  17 MR. LEE: What notes are we  18 talking about?  19 MR. SUCKLE: November 1 through  20 November 3rd nursing notes.  21 Q. Do you have it?  22 A. Yes.  23 Q. We are looking at a page in the  24 hospital chart. At the top it's dated  25 11/1/2009. And the first entry is</p>	<p style="text-align: right;">Page 129</p> <p>1 L. ALDANA-BERNIER  2 Q. How about November 2nd, 2009,  3 at 10:47, did you know the nurse  4 reported, "The patient was calm and  5 cooperative, no signs of acute physical  6 distress." Did you know about that note  7 when you wrote your note of November 2nd,  8 2009?  9 A. No.  10 Q. How about the note of November  11 2nd, 2009, at 10:06, "Patient denied  12 suicidal/homicidal ideations," did you  13 know about that note when you wrote your  14 note of November 2nd, 2009?  15 A. No.  16 Q. Do you know about it at any  17 time during Mr. Schoolcraft's  18 hospitalization?  19 A. About all of these notes, no,  20 because they belong to the emergency  21 medical --  22 Q. You never looked at any of  23 those nursing notes from November 2nd,  24 2009, at 13:51 through November 3rd,  25 2009, at 8:27 at any time --</p>

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<p style="text-align: right;">Page 130</p> <p>1 L. ALDANA-BERNIER</p> <p>2 MR. CALLAN: Objection.</p> <p>3 Q. -- during Mr. Schoolcraft's</p> <p>4 hospitalization?</p> <p>5 MR. CALLAN: How many times do</p> <p>6 you have to go back to this, Counsel?</p> <p>7 Q. Am I correct?</p> <p>8 A. These record don't come to our</p> <p>9 emergency room [indicating].</p> <p>10 Q. Turning briefly forward in the</p> <p>11 chart right where you are, there is a</p> <p>12 section called "Diagnostics" in the</p> <p>13 medical chart probably pages ahead.</p> <p>14 It's a note November 1st, 2009.</p> <p>15 It actually shows his diagnostics in the</p> <p>16 printed form and the first entry is</p> <p>17 November 1st, 2009, at 12:59, urinalysis.</p> <p>18 What is urinalysis, do you</p> <p>19 know?</p> <p>20 A. Urinalysis is patient will give</p> <p>21 urine, and they will test the urine for</p> <p>22 any presence of like blood or any</p> <p>23 infection.</p> <p>24 Q. So the patient is required to</p> <p>25 do what, urinate into something?</p>	<p style="text-align: right;">Page 132</p> <p>1 L. ALDANA-BERNIER</p> <p>2 urine tox, correct?</p> <p>3 A. Not every patient but depending</p> <p>4 on what the situation is because they</p> <p>5 would like in your toxicology you can</p> <p>6 also determine what your diagnosis is,</p> <p>7 what -- you can see if the bizarre</p> <p>8 behavior or agitation is caused from</p> <p>9 substances.</p> <p>10 Q. Did Mr. Schoolcraft come to the</p> <p>11 hospital for the purpose of having his</p> <p>12 urine tested?</p> <p>13 A. You want to rule out a</p> <p>14 pathology secondary to substance abuse.</p> <p>15 You have to get a urine toxicology.</p> <p>16 Q. You have to do that?</p> <p>17 A. Anyone come in agitated,</p> <p>18 bizarre, didn't have a psych history,</p> <p>19 then you have to get a urine.</p> <p>20 Q. So Mr. Schoolcraft had to give</p> <p>21 that urine sample, correct?</p> <p>22 A. They requested it so he has to</p> <p>23 give it.</p> <p>24 Q. CBC, that's a blood test?</p> <p>25 A. Blood count test.</p>
<p style="text-align: right;">Page 131</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. Yes.</p> <p>3 Q. Was he given an apparatus?</p> <p>4 A. Either they will give him a</p> <p>5 container, urinal, or he has to go to the</p> <p>6 bathroom.</p> <p>7 Q. There is also the test right</p> <p>8 there at the same time, 12:59 urine tox,</p> <p>9 what is that?</p> <p>10 A. Toxicology, they test if they</p> <p>11 are using drugs.</p> <p>12 Q. So Mr. Schoolcraft was</p> <p>13 subjected to a test so see if he was</p> <p>14 using any drugs?</p> <p>15 MR. RADOMISLI: Objection to</p> <p>16 form.</p> <p>17 Q. Correct?</p> <p>18 A. Every patient that comes to the</p> <p>19 emergency room, we request a urinalysis</p> <p>20 and urine toxicology.</p> <p>21 Q. Every patient that comes to the</p> <p>22 medical emergency room?</p> <p>23 A. Depending on what the situation</p> <p>24 is.</p> <p>25 Q. So not every patient has to do</p>	<p style="text-align: right;">Page 133</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. So somebody stuck a needle in</p> <p>3 his arm and drew blood?</p> <p>4 A. Yes.</p> <p>5 Q. The THC test, how is that done?</p> <p>6 A. Through urine.</p> <p>7 Q. A CAT scan of his head?</p> <p>8 A. CAT scan of the head, yes.</p> <p>9 Q. How is that done?</p> <p>10 A. He has to go under a big</p> <p>11 machine wherein they have to test his --</p> <p>12 x-ray his brain to see if there is any</p> <p>13 other causes, organic causes: trauma,</p> <p>14 pathology, any mass, or any reason why</p> <p>15 that patient came in.</p> <p>16 It was his first episode of --</p> <p>17 psychotic episode. You have to do a CAT</p> <p>18 scan of the head especially if he was</p> <p>19 aged 34 years old. First psych episode</p> <p>20 at 34, we have to do a psych CT.</p> <p>21 Q. And Mr. Schoolcraft had to go</p> <p>22 through that test?</p> <p>23 A. He has to go through that test,</p> <p>24 yes.</p> <p>25 Q. What is TSH?</p>

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<p style="text-align: right;">Page 134</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. That is thyroid stimulating</p> <p>3 hormone, to test his thyroid function.</p> <p>4 Q. How?</p> <p>5 A. Through blood.</p> <p>6 Q. Is that a separate test than</p> <p>7 the CBC test?</p> <p>8 A. It's a separate tube, yes.</p> <p>9 Q. With a needle aspirating blood</p> <p>10 out?</p> <p>11 A. Yes.</p> <p>12 Q. RPR, what is that?</p> <p>13 A. That is to test for syphilis.</p> <p>14 Q. So Mr. Schoolcraft was</p> <p>15 subjected to a syphilis test while he was</p> <p>16 in the hospital?</p> <p>17 MR. RADOMISLI: Objection to</p> <p>18 form.</p> <p>19 A. Just to make sure that's not</p> <p>20 the reason why he was behaving bizarre.</p> <p>21 Q. Okay. And he had to go through</p> <p>22 that test, correct?</p> <p>23 A. Yes.</p> <p>24 Q. By the way, the CAT scan showed</p> <p>25 he had a normal brain, correct?</p>	<p style="text-align: right;">Page 136</p> <p>1 L. ALDANA-BERNIER</p> <p>2 saying there is a conspiracy against him</p> <p>3 or if someone will say someone is talking</p> <p>4 about him; there's some sort of paranoia,</p> <p>5 jealousy. There are different kinds of</p> <p>6 persecution. It's a delusion.</p> <p>7 Q. And this was all done by Dr.</p> <p>8 Tariq, right?</p> <p>9 A. Yes.</p> <p>10 Q. That was Dr. Tariq's only sole</p> <p>11 diagnosis on this form, correct?</p> <p>12 A. No, this was from the emergency</p> <p>13 room, the medical ER.</p> <p>14 Q. Let's look at the bottom of the</p> <p>15 form. Doesn't it say Dr. Tariq?</p> <p>16 A. Yes.</p> <p>17 Q. So this was Dr. Tariq's</p> <p>18 diagnosis, correct?</p> <p>19 MR. RADOMISLI: Objection.</p> <p>20 A. Yes.</p> <p>21 Q. And Dr. Tariq didn't make any</p> <p>22 other diagnosis besides this diagnosis of</p> <p>23 paranoia on this form, correct?</p> <p>24 MR. RADOMISLI: Objection.</p> <p>25 Q. On that form, did he make any</p>
<p style="text-align: right;">Page 135</p> <p>1 L. ALDANA-BERNIER</p> <p>2 MR. SMITH: What was the answer</p> <p>3 to that?</p> <p>4 MR. SUCKLE: Nothing yet.</p> <p>5 A. Yes.</p> <p>6 Q. On that same page, there is a</p> <p>7 diagnosis, correct?</p> <p>8 A. Yes.</p> <p>9 Q. What is that?</p> <p>10 A. Paranoid.</p> <p>11 Q. There a number next to that,</p> <p>12 what is that?</p> <p>13 A. That's the code.</p> <p>14 Q. What does it relate to?</p> <p>15 A. That is the code they use for</p> <p>16 billing.</p> <p>17 Q. That's for billing?</p> <p>18 A. Yes, diagnosis 2979.</p> <p>19 Q. Let's go with paranoid, what</p> <p>20 does that mean?</p> <p>21 A. Like a false belief about what</p> <p>22 is going on in your environment that is</p> <p>23 not in agreement with the culture;</p> <p>24 someone that will say they feel he is</p> <p>25 being watched or followed or somebody</p>	<p style="text-align: right;">Page 137</p> <p>1 L. ALDANA-BERNIER</p> <p>2 other diagnosis?</p> <p>3 A. Paranoid.</p> <p>4 Q. That's the only diagnosis Dr.</p> <p>5 Tariq made?</p> <p>6 MR. LEE: Objection.</p> <p>7 MR. CALLAN: Objection.</p> <p>8 MR. RADOMISLI: Objection.</p> <p>9 Q. On this form.</p> <p>10 MR. LEE: Think of things in</p> <p>11 isolation. There is another form that</p> <p>12 has a diagnosis.</p> <p>13 MR. SUCKLE: All right, Counsel.</p> <p>14 A. I don't think this was him that</p> <p>15 put that there, Dr. Tariq who put that</p> <p>16 there.</p> <p>17 Q. Who put that there?</p> <p>18 A. In here it was just, they just</p> <p>19 put his name [indicating]. This was the</p> <p>20 emergency notes. This was the emergency</p> <p>21 notes.</p> <p>22 Q. So you don't know who made that</p> <p>23 diagnosis?</p> <p>24 A. I don't know.</p> <p>25 Q. When you did your evaluation of</p>

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<p style="text-align: right;">Page 138</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Mr. Schoolcraft, did you know about the</p> <p>3 result of the CAT scan?</p> <p>4 A. The blood work. I will not</p> <p>5 remember if I read the CAT scan at that</p> <p>6 time. I don't have a recollection.</p> <p>7 The only time -- it's already</p> <p>8 written down in our -- from the medical</p> <p>9 doctor so if we go over to the notes, I</p> <p>10 have read the CT is normal.</p> <p>11 Q. So you didn't make a note of</p> <p>12 that, that you read it, you're relying on</p> <p>13 the note in the chart?</p> <p>14 A. The notes, yes.</p> <p>15 MR. RADOMISLI: Off the record.</p> <p>16 MR. SMITH: Time is 1:23. Going</p> <p>17 off the record.</p> <p>18 [Discussion held off the</p> <p>19 record.]</p> <p>20 [Whereupon, at 1:23 p.m., a</p> <p>21 recess was taken.]</p> <p>22 [Whereupon, at 2:30 p.m., the</p> <p>23 testimony continued.]</p> <p>24 MR. SMITH: We are going back on</p> <p>25 the record. It's 2:30.</p>	<p style="text-align: right;">Page 140</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. What is a nursing assessment.</p> <p>3 A. This is patient - the nurse</p> <p>4 --the second nurse.</p> <p>5 THE REPORTER: I'm sorry.</p> <p>6 A. This is the second nurse that</p> <p>7 sees the patient when he comes to the</p> <p>8 emergency room.</p> <p>9 Q. Is the patient retriaged in the</p> <p>10 emergency room?</p> <p>11 A. Let me just see. No, he come</p> <p>12 directly. He doesn't pass through the</p> <p>13 triage department.</p> <p>14 Q. When you say "the second</p> <p>15 nurse," who is the first nurse?</p> <p>16 A. His second nurse because he is</p> <p>17 already this form [sic]. The first nurse</p> <p>18 are usually the ones in triage.</p> <p>19 Q. Did Adrian Schoolcraft see a</p> <p>20 nurse prior to the nurse who filled out</p> <p>21 this nursing assessment form in the</p> <p>22 psychiatric emergency room: Was there a</p> <p>23 triage nurse?</p> <p>24 A. I think there was a triage</p> <p>25 nurse because he came directly from</p>
<p style="text-align: right;">Page 139</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Doctor, did you discuss your</p> <p>3 testimony with anybody during the break?</p> <p>4 A. No.</p> <p>5 Q. Doctor, there is a nursing</p> <p>6 assessment form from the hospital record</p> <p>7 dated November 1, 2009, at 9:00 a.m. Can</p> <p>8 you turn to that?</p> <p>9 [Witness complying.]</p> <p>10 MR. CALLAN: This is the one.</p> <p>11 See if you can find it.</p> <p>12 Is that the general medicine</p> <p>13 department?</p> <p>14 MR. SUCKLE: Department of</p> <p>15 psychiatry.</p> <p>16 Q. Doctor, I have asked you to</p> <p>17 turn to the nursing assessment form dated</p> <p>18 November 1, 2009, from the Department of</p> <p>19 Psychiatry Emergency Division.</p> <p>20 Doctor, do you have that in</p> <p>21 front of you now?</p> <p>22 A. Yes.</p> <p>23 Q. It's dated 9 a.m. What is</p> <p>24 that, Doctor?</p> <p>25 A. This is a nursing assessment.</p>	<p style="text-align: right;">Page 141</p> <p>1 L. ALDANA-BERNIER</p> <p>2 emergency, medical ER.</p> <p>3 Q. You think this was not -- it's</p> <p>4 your testimony you believe there is not a</p> <p>5 second triage in the psychiatric</p> <p>6 emergency room; is that what you're</p> <p>7 saying?</p> <p>8 A. That's what I'm saying.</p> <p>9 Q. So, Doctor, this would be the</p> <p>10 first nurse assessment in the psychiatric</p> <p>11 ER, correct?</p> <p>12 A. The first nurse, yes.</p> <p>13 Q. Look at that nursing assessment</p> <p>14 form that we have pulled out, did you</p> <p>15 review this form before you did your</p> <p>16 evaluation of Mr. Schoolcraft?</p> <p>17 A. I will not remember if it was</p> <p>18 in the chart. I may have gone through</p> <p>19 it.</p> <p>20 Q. When you say you may have gone</p> <p>21 through, do you have a habit, a custom</p> <p>22 and practice of reviewing prior notes</p> <p>23 from the psychiatric emergency room when</p> <p>24 you evaluate the patient?</p> <p>25 A. That depends on the case.</p>

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<p style="text-align: right;">Page 142</p> <p>1 L. ALDANA-BERNIER</p> <p>2 There is times that the patient comes,</p> <p>3 and the nurse hasn't seen the patient,</p> <p>4 and it's an emergency, we have to go see</p> <p>5 the patient.</p> <p>6 Q. My question is: Did you review</p> <p>7 the records of psychiatric emergency room</p> <p>8 that exist for a patient at the time that</p> <p>9 you would examine the patient?</p> <p>10 A. I do review the records, yes.</p> <p>11 Q. So do you recall then that you</p> <p>12 reviewed this nursing assessment?</p> <p>13 A. I do not recall that, but I</p> <p>14 usually review the records.</p> <p>15 Q. So your habit and custom would</p> <p>16 have been to review this form?</p> <p>17 A. Yes.</p> <p>18 Q. Doctor, on this form on the</p> <p>19 first page it says, "circumstances</p> <p>20 leading to admission." Do you see that</p> <p>21 on the first page of that form,</p> <p>22 circumstances leading to admission?</p> <p>23 A. Yes.</p> <p>24 Q. Actually, let's go up the line</p> <p>25 before, "patient's chief complaint," do</p>	<p style="text-align: right;">Page 144</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. What does that mean, do you</p> <p>3 know?</p> <p>4 A. Means there is a report that he</p> <p>5 was paranoid and he is a danger to</p> <p>6 himself, a report made by his police</p> <p>7 sergeant.</p> <p>8 Q. So that record is indicating</p> <p>9 that the police sergeant has reported</p> <p>10 these things that you just read to</p> <p>11 Jamaica Hospital, correct?</p> <p>12 MR. KRETZ: Objection.</p> <p>13 Q. The police sergeant is</p> <p>14 reporting that by the police sergeant's</p> <p>15 assessment, Mr. Schoolcraft is paranoid,</p> <p>16 correct?</p> <p>17 MR. KRETZ: Objection.</p> <p>18 A. Yes.</p> <p>19 Q. And the police officer is</p> <p>20 reporting that the police officer</p> <p>21 believed that Mr. Schoolcraft was a</p> <p>22 danger to himself, correct?</p> <p>23 MR. KRETZ: Objection.</p> <p>24 A. Yes.</p> <p>25 Q. Did you in your evaluation of</p>
<p style="text-align: right;">Page 143</p> <p>1 L. ALDANA-BERNIER</p> <p>2 you see that?</p> <p>3 A. Yes.</p> <p>4 Q. What did the nurse write there?</p> <p>5 A. Denies.</p> <p>6 Q. What does that mean, Doctor?</p> <p>7 A. He didn't have any complaints</p> <p>8 so he put denies.</p> <p>9 Q. He had no complaints to make to</p> <p>10 the nurse?</p> <p>11 A. Yes.</p> <p>12 Q. That's how you understood it</p> <p>13 when you read it?</p> <p>14 A. Yes.</p> <p>15 Q. Under that, circumstances</p> <p>16 leading to admission, do you see that?</p> <p>17 A. Yes.</p> <p>18 Q. What is B-I-B?</p> <p>19 A. Brought in by.</p> <p>20 Q. What else did you read when you</p> <p>21 read this form?</p> <p>22 A. "Brought in by NYPD after</p> <p>23 client was deemed to be paranoid and</p> <p>24 danger to himself by his police</p> <p>25 sergeant."</p>	<p style="text-align: right;">Page 145</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Mr. Schoolcraft rely on that note at all?</p> <p>3 A. Did I rely only on this note?</p> <p>4 Q. No, at all. Was it part of</p> <p>5 your evaluation?</p> <p>6 A. Not only this note.</p> <p>7 Q. Was this note part of your</p> <p>8 evaluation?</p> <p>9 A. I read it.</p> <p>10 Q. Did you use the information in</p> <p>11 this note at all in your evaluation?</p> <p>12 A. I read it. I read the</p> <p>13 complaint. I read this note of the</p> <p>14 nurse.</p> <p>15 If you are going to ask me if</p> <p>16 this was part of my decision to admit</p> <p>17 him, no, not that alone.</p> <p>18 Q. Was it part at all of your</p> <p>19 decision?</p> <p>20 A. I'm saying it's not that alone.</p> <p>21 Q. I understand that. I'm asking</p> <p>22 a very specific question.</p> <p>23 Did it play a part at all in</p> <p>24 your decision to admit Mr. Schoolcraft?</p> <p>25 A. If I read that kind of</p>

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<p style="text-align: right;">Page 146</p> <p>1 L. ALDANA-BERNIER 2 statement, I will have to see other 3 aspects that will make me decide for the 4 reason why I admitted the patient. 5 Q. You have to make your own 6 evaluation? 7 A. I have to see the patient, 8 access all of the notes of the resident, 9 and I have to see the patient and make my 10 assessment if the patient needs an 11 admission. 12 Q. Regardless of what notes you do 13 or don't read, you make your only final 14 assessment of what your opinion is 15 regarding what the patient needs? 16 A. It's not only me make that 17 decision, I will probably also will ask a 18 second opinion. 19 Q. I understand that you may ask a 20 second opinion, but do you form your own 21 independent opinion regarding your 22 assessment of your own patients? 23 MR. CALLAN: Objection. 24 Are you asking if she is not 25 considering all of the notes in the</p>	<p style="text-align: right;">Page 148</p> <p>1 L. ALDANA-BERNIER 2 Schoolcraft's records, did you form an 3 opinion before you got a second opinion 4 with regard to Mr. Schoolcraft? 5 A. No, I asked for a second 6 opinion. 7 Q. So you did not form an opinion 8 prior to any second opinion? 9 A. I have to ask the second 10 opinion at that time. 11 Q. Why was that? 12 A. Because he was a police 13 officer. 14 Q. Because he was a police 15 officer, you were unable to come to your 16 own opinion without getting a second 17 opinion; is that correct? 18 MR. CALLAN: Objection to form. 19 MR. RADOMISLI: Objection to 20 form. 21 A. No, but I think two heads are 22 better than one. 23 Q. Did you have an opinion before 24 the second opinion was rendered regarding 25 Mr. Schoolcraft?</p>
<p style="text-align: right;">Page 147</p> <p>1 L. ALDANA-BERNIER 2 chart? 3 MR. SUCKLE: No, I'm asking if 4 she makes her own independent 5 assessment of the patient regarding 6 this patient. 7 A. The totality of the notes. 8 Q. Is it solely based on the 9 notes? 10 A. Plus my assessment. Of course 11 I have to go see the patient. 12 Q. It's your assessment and the 13 notes that you use to form your opinion 14 regarding your evaluation of a patient, 15 correct? 16 A. Plus the second opinion, yes. 17 Q. Plus a second opinion? 18 A. Yes. 19 Q. Do you not form an opinion 20 until you get a second opinion? 21 A. That depends on the case. If 22 it's a case that I think needs a second 23 opinion, then I have to ask for a second 24 opinion. 25 Q. From your review of Mr.</p>	<p style="text-align: right;">Page 149</p> <p>1 L. ALDANA-BERNIER 2 A. My opinion was I think I needed 3 a second opinion so I asked for a second 4 opinion. 5 Q. Was that your only opinion 6 prior to the second opinion? 7 A. I think his case was something 8 that needed to be determined by two 9 doctors to see if he needed admission. 10 Q. So you agree that your opinion 11 alone you didn't think was sufficient for 12 admission of Mr. Schoolcraft to the 13 hospital? 14 A. Well, my opinion was that I 15 know he needed admission. I needed 16 someone to second my opinion. 17 Q. What was your opinion based on 18 that he needed admission? 19 A. In whole story about this case 20 when he had to barricade himself, he was 21 acting bizarre, that he was agitated in 22 the ER, and that because he was a police 23 officer and my fear if I discharged him 24 to society, that something -- if 25 something wrong might happen -- if I --</p>

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<p style="text-align: right;">Page 150</p> <p>1 L. ALDANA-BERNIER 2 at that time in 2009, let's say if I 3 forward that thinking, I was trying to 4 prevent another case of navy yard 5 disaster, that's how I always think; that 6 I do not want a disaster happening when 7 I'm thinking about admitting a patient. 8 He is a police officer. He may 9 have access to guns even if they took all 10 his guns already. I think it's easier 11 for police officer to get access to gun. 12 Q. So the fact that he was a 13 police officer weighed heavily on your 14 decision to admit Mr. Schoolcraft? 15 MR. RADOMISLI: Objection. 16 MR. LEE: Objection. 17 MR. CALLAN: Objection to form 18 as well. 19 A. The fact he was a police 20 officer, bizarre, agitated, delusional is 21 the reason why I admitted him. 22 Q. You talked about having access 23 to guns. 24 A. Yes. 25 Q. How did that play into your</p>	<p style="text-align: right;">Page 152</p> <p>1 L. ALDANA-BERNIER 2 the area. 3 Q. Let's be clear, skin condition, 4 contusion, slash, laceration, and the box 5 yes is checked or X'd, correct? 6 A. Yes. 7 Q. So the nurse was observing 8 contusions on his body somewhere based on 9 that chart, correct? 10 A. Yes. 11 Q. Going down to the next line, 12 there is a description of those 13 contusions, correct? 14 A. Yes. 15 Q. And those contusions are purple 16 and black, correct? 17 A. [Indicating.] 18 Q. Correct? 19 A. Yes. 20 Q. And the nurse has now circled 21 both the front of both arms and the back 22 of both arms, correct? 23 A. Yes. 24 Q. So did you understand this to 25 mean that Mr. Schoolcraft had purple and</p>
<p style="text-align: right;">Page 151</p> <p>1 L. ALDANA-BERNIER 2 decision making? 3 A. He is a police officer. 4 Q. We still haven't gotten my 5 basic question answered. 6 Did you have an opinion before 7 the second opinion about whether or not 8 Mr. Schoolcraft needed to be admitted? 9 MR. CALLAN: Objection to form 10 of the question. 11 A. I did, yes. 12 Q. What was that opinion? 13 A. I was going to admit him, but I 14 had to get that second opinion to agree 15 to my decision. 16 Q. Keep that page open. Go down 17 to where it talks about skin contusion, 18 slash, laceration. Do you see that? 19 A. Yes. 20 Q. Did you read that when you read 21 that form? 22 A. Yes. 23 Q. What did you read when you read 24 that form, what does it say? 25 A. Purple and black and he circled</p>	<p style="text-align: right;">Page 153</p> <p>1 L. ALDANA-BERNIER 2 black contusions on the front and back of 3 both of his arms? 4 A. Yes. 5 Q. Do you know what that was from? 6 A. Possible from restraints, also 7 be possible from any fights he had. 8 Q. And the only restraints that 9 you were aware of that he was in, at 10 least reflected in the hospital record, 11 are handcuffs, correct? 12 A. That's correct. 13 Q. Taking the next page, the 14 second page of the nurse's assessment 15 form, do you see homicidal and suicidal, 16 do you see that at the bottom of that 17 form? 18 A. Yes. 19 Q. Ideations for homicidal, no, 20 correct? 21 A. That's correct. 22 Q. That was the nurse's assessment 23 at that time? 24 A. Yes. 25 Q. So the patient is in front of</p>

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<p style="text-align: right;">Page 154</p> <p>1 L. ALDANA-BERNIER</p> <p>2 nurse, the nurse is evaluating the</p> <p>3 patient, and the nurse is making an</p> <p>4 assessment, correct?</p> <p>5 A. That's correct.</p> <p>6 Q. Next to it, suicidal ideation,</p> <p>7 no?</p> <p>8 MR. LEE: Objection to form.</p> <p>9 A. Correct.</p> <p>10 Q. Suicidal ideations.</p> <p>11 Again, the patient was in front</p> <p>12 of the nurse and she made this</p> <p>13 assessment, correct?</p> <p>14 A. That's correct.</p> <p>15 Q. Doctor, looking at the third</p> <p>16 page of this form, this clinical risk</p> <p>17 assessment, behavioral dyscontrol,</p> <p>18 correct, what does that mean?</p> <p>19 A. Out of control.</p> <p>20 Q. And he was not required for any</p> <p>21 restraints or seclusion, correct?</p> <p>22 A. No.</p> <p>23 Q. So as of the November 1st, at 9</p> <p>24 a.m., there was no reason to restrain</p> <p>25 this man, correct?</p>	<p style="text-align: right;">Page 156</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. This is a record of the medical</p> <p>3 ER so I did not see this one.</p> <p>4 Q. You didn't know that?</p> <p>5 A. I did not see that.</p> <p>6 Q. What was Mr. Schoolcraft's</p> <p>7 blood pressure when he came in to the</p> <p>8 emergency room at October 31, 2009, at</p> <p>9 23:03?</p> <p>10 A. It was 139 over 80.</p> <p>11 Q. Do you have an opinion with a</p> <p>12 reasonable degree of medical certainty</p> <p>13 what normal blood pressure is?</p> <p>14 A. Normal blood pressure is 120</p> <p>15 over 80, that's the normal blood</p> <p>16 pressure.</p> <p>17 Q. Was 139 over 80 within the</p> <p>18 normal range?</p> <p>19 A. The diastolic which is the</p> <p>20 upper level, was a little bit elevated.</p> <p>21 Q. Slightly elevated?</p> <p>22 A. Slightly elevated.</p> <p>23 Q. And the pulse was 115. Is that</p> <p>24 within the normal range?</p> <p>25 A. Yes, elevated.</p>
<p style="text-align: right;">Page 155</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. Correct.</p> <p>3 Q. Looking at Jamaica Hospital</p> <p>4 triage note from the nurse's note</p> <p>5 10/31/09 at 23:03.</p> <p>6 A. What date was that?</p> <p>7 Q. October 31, 2009, Jamaica</p> <p>8 Hospital triage, at 23:03 hours.</p> <p>9 A. I have 11/1, 11/3.</p> <p>10 MR. SUCKLE: May I help you?</p> <p>11 Q. Looking at now Jamaica Hospital</p> <p>12 triage note, 10/31/09, 23:03, did you</p> <p>13 review this prior to your assessment of</p> <p>14 Mr. Schoolcraft?</p> <p>15 A. No, this is a medical chart.</p> <p>16 Q. Did you know that somebody</p> <p>17 reported to the triage nurse that Mr.</p> <p>18 Schoolcraft was in police custody when he</p> <p>19 came in?</p> <p>20 A. Yes.</p> <p>21 Q. Where did you get that from?</p> <p>22 A. From the records.</p> <p>23 Q. Did you also know that the</p> <p>24 triage nurse suicide risk assessment was</p> <p>25 no risk identified?</p>	<p style="text-align: right;">Page 157</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Slightly elevated, correct?</p> <p>3 A. Elevated.</p> <p>4 Q. There is a note on the chart</p> <p>5 for pain scale. What was the pain scale?</p> <p>6 A. Mild, 3 to 4.</p> <p>7 Q. Do you know what that relates</p> <p>8 to?</p> <p>9 A. He came in with abdominal pain.</p> <p>10 They must relate to abdominal pain.</p> <p>11 Q. Do you know what the category</p> <p>12 of urgency was assigned to Mr.</p> <p>13 Schoolcraft?</p> <p>14 A. The --</p> <p>15 Q. The category where he was</p> <p>16 placed by the triage nurse with regard to</p> <p>17 how quick or not quick he should be seen?</p> <p>18 A. Okay. The category is urgent</p> <p>19 [indicating].</p> <p>20 Q. What does that mean?</p> <p>21 A. Urgent that he needs immediate</p> <p>22 attention.</p> <p>23 MR. CALLAN: Keep your voice up,</p> <p>24 Doctor. Everybody around the table</p> <p>25 has to hear.</p>

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<p style="text-align: right;">Page 158</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Doctor, just because we are</p> <p>3 here, I don't want you to have to flip</p> <p>4 through again, can you find where you</p> <p>5 filled out the form for 9.39 of Mental</p> <p>6 Hygiene Law.</p> <p>7 You have turned to a page</p> <p>8 called -- what is at the top of page,</p> <p>9 "Emergency Admission Section 9.39"?</p> <p>10 A. Yes.</p> <p>11 Q. And you signed the bottom of</p> <p>12 that form?</p> <p>13 A. Yes.</p> <p>14 Q. And you dated that form?</p> <p>15 A. Yes.</p> <p>16 Q. What did you date it?</p> <p>17 A. 11/3/2009, 1:20 in the</p> <p>18 afternoon.</p> <p>19 Q. That's the time that you made</p> <p>20 your evaluation that Mr. Schoolcraft</p> <p>21 needed to be admitted?</p> <p>22 A. Yes.</p> <p>23 Q. That's the date and time?</p> <p>24 A. Yes.</p> <p>25 Q. The reason I bring this to your</p>	<p style="text-align: right;">Page 160</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. 11/1/2009, that is when he was</p> <p>3 in our medical ER.</p> <p>4 Q. Where did you get the time that</p> <p>5 you put on the form we have in front of</p> <p>6 us with regard to the Mental Hygiene Law,</p> <p>7 the date of admission, where did you get</p> <p>8 the time 23:03 from?</p> <p>9 A. It was -- it had said the time</p> <p>10 of arrival at the hospital.</p> <p>11 Q. Isn't that the time that the</p> <p>12 triage nurse first sees him?</p> <p>13 A. The time the triage nurse saw</p> <p>14 the patient.</p> <p>15 Q. 23:03?</p> <p>16 A. That was 10/31 though.</p> <p>17 Q. So your form is incorrect when</p> <p>18 it says November 1. It should have been</p> <p>19 10/31, correct?</p> <p>20 A. The patient came to the ER 12</p> <p>21 -- one -- 12 midnight 23:03 -- 12 noon</p> <p>22 that was -- 23:03, yeah, this is.</p> <p>23 MR. CALLAN: Don't think out</p> <p>24 loud, Doctor.</p> <p>25 MR. SUCKLE: Don't interrupt her</p>
<p style="text-align: right;">Page 159</p> <p>1 L. ALDANA-BERNIER</p> <p>2 attention now, is there a place on that</p> <p>3 form to indicate when the patient was</p> <p>4 first admitted to the hospital?</p> <p>5 A. 11/1, yes.</p> <p>6 Q. And is there a time on there?</p> <p>7 A. 23:03.</p> <p>8 Q. In fact we have in front of us</p> <p>9 the triage note for when the patient was</p> <p>10 admitted, and in fact the time was 23:03,</p> <p>11 correct?</p> <p>12 A. Yes.</p> <p>13 Q. But the date was actually</p> <p>14 October 31st, 2009, correct?</p> <p>15 A. That's correct.</p> <p>16 Q. So your note regarding the date</p> <p>17 of admission was incorrect, correct?</p> <p>18 A. That was the time that I was in</p> <p>19 the emergency room, 11/1.</p> <p>20 Q. When you say "the emergency</p> <p>21 room," what are you referring to?</p> <p>22 A. Our medical ER.</p> <p>23 Q. So he was in the medical ER</p> <p>24 exactly at 23:03 as well as the triage</p> <p>25 exactly 23:03, one day later?</p>	<p style="text-align: right;">Page 161</p> <p>1 L. ALDANA-BERNIER</p> <p>2 answer.</p> <p>3 MR. CALLAN: Sorry.</p> <p>4 A. 11/1/2009 he was in the</p> <p>5 emergency room.</p> <p>6 Q. When you say "in the emergency</p> <p>7 room," what does that mean?</p> <p>8 A. When he arrived at the</p> <p>9 emergency room, time of arrival to the</p> <p>10 hospital.</p> <p>11 Q. Isn't the time of arrival 23:03</p> <p>12 on 10/31/09?</p> <p>13 MR. CALLAN: Objection to the</p> <p>14 form of the question.</p> <p>15 A. It said here in the notes</p> <p>16 10/31; however, when he came to the ER,</p> <p>17 it was 11/1.</p> <p>18 Q. What did the form ask you to</p> <p>19 fill in there?</p> <p>20 A. It's saying time of arrival at</p> <p>21 the hospital.</p> <p>22 Q. Were you trying to put in the</p> <p>23 time of arrival at the hospital on that</p> <p>24 form?</p> <p>25 A. It's the time of the arrival at</p>

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<p style="text-align: right;">Page 162</p> <p>1 L. ALDANA-BERNIER</p> <p>2 the hospital.</p> <p>3 Q. Can we agree that you put the</p> <p>4 wrong date?</p> <p>5 A. I probably put the wrong time</p> <p>6 but 11/1 when he came to the emergency</p> <p>7 room, the psych emergency room.</p> <p>8 Q. I'm just trying to be clear,</p> <p>9 your intent was to put in November 1st,</p> <p>10 correct?</p> <p>11 A. That's when he came to the</p> <p>12 emergency room.</p> <p>13 Q. And you got the time 23:03 from</p> <p>14 where?</p> <p>15 A. I do not remember if -- this</p> <p>16 was a long time ago, 2009. I don't have</p> <p>17 any recollection.</p> <p>18 Q. You have in front of you the</p> <p>19 triage notes which said he actually</p> <p>20 arrived at the hospital at a time, 23:03,</p> <p>21 correct?</p> <p>22 A. Yes.</p> <p>23 Q. So he was actually at the</p> <p>24 hospital at the time that you wrote in</p> <p>25 there, 23:03, correct?</p>	<p style="text-align: right;">Page 164</p> <p>1 L. ALDANA-BERNIER</p> <p>2 anyway.</p> <p>3 Could we have the question read</p> <p>4 back.</p> <p>5 MR. CALLAN: Which one of the 20</p> <p>6 questions you have asked?</p> <p>7 MR. SUCKLE: Counselor, would</p> <p>8 you like to have your show now? Go</p> <p>9 ahead.</p> <p>10 Can I have the question --</p> <p>11 MR. CALLAN: I will like to have</p> <p>12 a clear record.</p> <p>13 MR. SUCKLE: I would too,</p> <p>14 unfortunately, I have a witness that</p> <p>15 doesn't want to seem to give me a</p> <p>16 clear answer.</p> <p>17 MR. CALLAN: Well, it's hard</p> <p>18 when you don't ask a question that's</p> <p>19 clear.</p> <p>20 MR. SUCKLE: It's a tough job.</p> <p>21 I'm learning as I'm going.</p> <p>22 MR. SHAFFER: So I'm not the</p> <p>23 only inexperienced person in the room.</p> <p>24 MR. SUCKLE: You'll have to</p> <p>25 excuse my inability to ask a question.</p>
<p style="text-align: right;">Page 163</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. That's when he was in the</p> <p>3 hospital, yes.</p> <p>4 Q. So you got the time right,</p> <p>5 correct?</p> <p>6 A. The time is right in here, yes.</p> <p>7 Q. But you are not willing to say</p> <p>8 that you simply made a mistake on the</p> <p>9 date, correct?</p> <p>10 MR. RADOMISLI: Objection to</p> <p>11 form. You keep mixing up the hospital</p> <p>12 from the psych emergency room.</p> <p>13 MR. SUCKLE: I'm not mixing up.</p> <p>14 MR. CALLAN: You are. You</p> <p>15 question doesn't clarify whether she</p> <p>16 was intending to put arrival at the</p> <p>17 psych ER or arrival at the hospital.</p> <p>18 I don't know where you were</p> <p>19 going with this question. You are</p> <p>20 going all over the place.</p> <p>21 MR. SUCKLE: I'm not.</p> <p>22 MR. CALLAN: You are. I object</p> <p>23 to the question. I don't know what</p> <p>24 you are asking her.</p> <p>25 MR. SUCKLE: I'm asking her</p>	<p style="text-align: right;">Page 165</p> <p>1 L. ALDANA-BERNIER</p> <p>2 By next year maybe I'll be able</p> <p>3 to.</p> <p>4 Q. Can you tell me where you got</p> <p>5 the time 23:03 from that you wrote in the</p> <p>6 record?</p> <p>7 MR. CALLAN: That she wrote</p> <p>8 where in the record, Counsel?</p> <p>9 A. I know I got the date from the</p> <p>10 time that he was transferred to the</p> <p>11 medical ER.</p> <p>12 Q. Where did you get the time that</p> <p>13 you wrote on the same form?</p> <p>14 A. I have to go back to 2009. I</p> <p>15 cannot remember.</p> <p>16 Q. Why didn't you write the date</p> <p>17 that he arrived at the hospital on the</p> <p>18 form that you have in front of you which</p> <p>19 is the Mental Hygiene Law 9.39 form, why</p> <p>20 didn't you write the time that he arrived</p> <p>21 at the hospital?</p> <p>22 A. Because there is a 9.39 in the</p> <p>23 psych emergency room so I have to write</p> <p>24 the time when he was in the psych</p> <p>25 emergency room.</p>

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<p style="text-align: right;">Page 166</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Does the form ask you for the</p> <p>3 date of arrival at the hospital?</p> <p>4 A. The date said in here time of</p> <p>5 arrival at the hospital, but we do not</p> <p>6 use this in the medical ER. We use it in</p> <p>7 the psych ER. So that is time he came --</p> <p>8 that is the date he came to the psych ER.</p> <p>9 Q. What time did he arrive at the</p> <p>10 psych ER?</p> <p>11 A. He came to the psych ER 12</p> <p>12 noon.</p> <p>13 Q. When you wrote that he arrived</p> <p>14 at 23:03, that was incorrect?</p> <p>15 A. He came in at 12 noon.</p> <p>16 Q. So it was incorrect when you</p> <p>17 wrote 23:03 as the time that he arrived?</p> <p>18 A. 12 p.m. I was checking -- on</p> <p>19 the record over here it says 23:03 he</p> <p>20 came so that's where I probably got my</p> <p>21 time. But then he came in on 11/1/2009.</p> <p>22 Q. What date did Mr. Schoolcraft</p> <p>23 arrive at Jamaica Hospital?</p> <p>24 A. 10/31.</p> <p>25 Q. You signed that form on</p>	<p style="text-align: right;">Page 168</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. And you agreed that he showed</p> <p>3 no homicidal ideations, correct?</p> <p>4 A. That's correct.</p> <p>5 Q. And you agree that he showed</p> <p>6 that he was calm?</p> <p>7 MR. CALLAN: We have already</p> <p>8 been down this road before, Counsel.</p> <p>9 We have gone through every single one</p> <p>10 of these questions.</p> <p>11 MR. SUCKLE: No.</p> <p>12 MR. CALLAN: Asked and answered.</p> <p>13 MR. SUCKLE: She adopted those</p> <p>14 as hers. I'm asking.</p> <p>15 MR. CALLAN: No. She hasn't</p> <p>16 said anything different than she said</p> <p>17 the last time.</p> <p>18 MR. SUCKLE: You know me, I'm --</p> <p>19 MR. CALLAN: I object to the</p> <p>20 repetitions nature of the question.</p> <p>21 Q. You agreed when you evaluated</p> <p>22 him he was calm?</p> <p>23 A. I agreed to the above notes.</p> <p>24 Q. Did you agree that he was not</p> <p>25 agitated?</p>
<p style="text-align: right;">Page 167</p> <p>1 L. ALDANA-BERNIER</p> <p>2 November 3rd?</p> <p>3 A. November 1st -- I signed on</p> <p>4 November 3rd, yes.</p> <p>5 Q. So you did your evaluation on</p> <p>6 November 3rd; am I correct?</p> <p>7 A. That was when he was admitted,</p> <p>8 November 3rd, so that's when he went</p> <p>9 upstairs.</p> <p>10 Q. When did you do your</p> <p>11 evaluation?</p> <p>12 A. That was on the 2nd.</p> <p>13 Q. Is there a note of your</p> <p>14 evaluation?</p> <p>15 A. I have in here saying that I</p> <p>16 have agreed with the above evaluation of</p> <p>17 the resident.</p> <p>18 Q. When did you make that note?</p> <p>19 A. That was on the 2nd.</p> <p>20 Q. Which residents were you</p> <p>21 agreeing with?</p> <p>22 A. Dr. Tariq and Dr. Slowik.</p> <p>23 Q. So you agreed that he showed no</p> <p>24 suicidal ideations, correct?</p> <p>25 A. Yes.</p>	<p style="text-align: right;">Page 169</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. I agreed he was calm.</p> <p>3 Q. And not agitated?</p> <p>4 A. That he was not agitated at the</p> <p>5 time of the interview.</p> <p>6 Q. And you interviewed him when he</p> <p>7 was in front of you?</p> <p>8 A. I saw him.</p> <p>9 Q. That's when you made your</p> <p>10 assessment, correct, when he was in front</p> <p>11 of you?</p> <p>12 A. Yes.</p> <p>13 THE WITNESS: Can I --</p> <p>14 MR. CALLAN: You can finish your</p> <p>15 answer.</p> <p>16 You're cutting her off, and she</p> <p>17 can finish her answer.</p> <p>18 Finish your answer, Doctor.</p> <p>19 MR. SUCKLE: Stop making</p> <p>20 speeches.</p> <p>21 MR. CALLAN: You're the one</p> <p>22 making speeches, cutting her off from</p> <p>23 giving her answer.</p> <p>24 MR. SUCKLE: How am I cutting</p> <p>25 anyone off?</p>

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<p style="text-align: right;">Page 170</p> <p>1 L. ALDANA-BERNIER</p> <p>2 MR. CALLAN: Did you finish your</p> <p>3 answer, or do you have more to say?</p> <p>4 THE WITNESS: Yes. I was trying</p> <p>5 to say that I agreed that he was calm,</p> <p>6 but it was not only the decision that</p> <p>7 you have to make or the decision that</p> <p>8 I made. I was looking at all factors</p> <p>9 that brought him to the hospital.</p> <p>10 Q. So you were told about what</p> <p>11 happened in his apartment?</p> <p>12 A. Everything, yes.</p> <p>13 Q. And you were considering what</p> <p>14 you were told by the police when they</p> <p>15 arrived in the hospital, correct?</p> <p>16 A. That's correct.</p> <p>17 Q. And do you know who Sergeant</p> <p>18 James is?</p> <p>19 A. No, I don't.</p> <p>20 Q. Did you ever speak to Sergeant</p> <p>21 James?</p> <p>22 A. No, I don't -- I did not.</p> <p>23 Q. Did you ever see any reference</p> <p>24 to Sergeant James providing any</p> <p>25 information that was recorded in the</p>	<p style="text-align: right;">Page 172</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. That's correct.</p> <p>3 Q. He was not trying to hurt</p> <p>4 himself, correct?</p> <p>5 A. That's correct.</p> <p>6 Q. In front of you, he wasn't</p> <p>7 acting bizarre, correct?</p> <p>8 A. That's correct but he was</p> <p>9 paranoid.</p> <p>10 Q. And the paranoia was that the</p> <p>11 sergeant told you they weren't trying to</p> <p>12 get him as he was saying, correct?</p> <p>13 MR. LEE: Objection to form.</p> <p>14 A. That he was the one that said</p> <p>15 that there was a possible conspiracy</p> <p>16 against him, that the officers -- that</p> <p>17 there is this problem between him and his</p> <p>18 supervisor, okay, so....</p> <p>19 Q. So in front of you, that</p> <p>20 paranoia is what he exhibited, correct?</p> <p>21 A. That's a form of psychosis,</p> <p>22 yes, paranoia.</p> <p>23 Q. Any other psychiatric behavior</p> <p>24 or psychosis that he exhibited in front</p> <p>25 of you other than being paranoid?</p>
<p style="text-align: right;">Page 171</p> <p>1 L. ALDANA-BERNIER</p> <p>2 hospital record?</p> <p>3 A. It's in the record.</p> <p>4 Q. In that context you know of</p> <p>5 Sergeant James because his name appears</p> <p>6 in the record, correct?</p> <p>7 A. That's correct.</p> <p>8 Q. And you know some of the things</p> <p>9 about the history about what took place</p> <p>10 in the apartment came from Sergeant</p> <p>11 James?</p> <p>12 A. That's what in the record.</p> <p>13 Q. When this patient was in front</p> <p>14 of you, he was not in need of restraints,</p> <p>15 correct?</p> <p>16 A. That's correct.</p> <p>17 Q. And when he was in front of</p> <p>18 you, he was not exhibiting any of the</p> <p>19 behaviors that would lead you to believe</p> <p>20 he was homicidal?</p> <p>21 A. That's correct.</p> <p>22 Q. And he was leading you to --</p> <p>23 not exhibiting any of the behaviors that</p> <p>24 would lead you to believe he was</p> <p>25 suicidal, correct?</p>	<p style="text-align: right;">Page 173</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. At that point in time?</p> <p>3 Q. Yes.</p> <p>4 A. There was nothing else.</p> <p>5 Q. Let's look at your note of</p> <p>6 November 2nd, 2009. What did you write?</p> <p>7 A. He was still complaining of</p> <p>8 pain in area of his right and left wrist.</p> <p>9 "States it was numb for two hours</p> <p>10 yesterday. Bruise was noted in the left</p> <p>11 inner aspect of arm and minimal area of</p> <p>12 bruise inner aspect of the right arm."</p> <p>13 Q. Why did you write those things</p> <p>14 down?</p> <p>15 A. Because then he showed it to me</p> <p>16 so I have to write them.</p> <p>17 Q. Did you do a physical</p> <p>18 examination of him?</p> <p>19 A. He showed it to me. That's a</p> <p>20 physical exam.</p> <p>21 Q. And you thought it was</p> <p>22 important to write down whatever symptoms</p> <p>23 or manifestations of some problems he was</p> <p>24 having, you thought it was important to</p> <p>25 write down, correct?</p>

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<p style="text-align: right;">Page 174</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. Yes.</p> <p>3 Q. Did you write down all of the</p> <p>4 things that he was exhibiting, physical</p> <p>5 problems he was having in your presence?</p> <p>6 A. I wrote, but he said that this</p> <p>7 is a setup; he would like a lawyer; and</p> <p>8 that internal affairs would like to</p> <p>9 interview him and he agreed.</p> <p>10 He was made aware that he was</p> <p>11 going upstairs and -- but he wanted to go</p> <p>12 home; however, I wrote, "agreed with the</p> <p>13 notes above of the resident."</p> <p>14 Q. So let's go back through this.</p> <p>15 You said he wanted a lawyer.</p> <p>16 He said that to you?</p> <p>17 A. Yes.</p> <p>18 Q. Did you do anything to help him</p> <p>19 get a lawyer?</p> <p>20 A. The lawyers -- usually they get</p> <p>21 the lawyer when they go upstairs in the</p> <p>22 inpatient unit.</p> <p>23 Q. When you say "usually"?</p> <p>24 A. They were entitled to -- they</p> <p>25 have legal representation when they go</p>	<p style="text-align: right;">Page 176</p> <p>1 L. ALDANA-BERNIER</p> <p>2 to call if they want to call.</p> <p>3 Q. Did you give him any paperwork</p> <p>4 there was a telephone number if he needed</p> <p>5 help?</p> <p>6 A. We don't have papers.</p> <p>7 Q. So you didn't give him any</p> <p>8 papers?</p> <p>9 A. Not in the emergency room, no.</p> <p>10 Q. You didn't hand him any papers,</p> <p>11 did you?</p> <p>12 A. No, I didn't hand him anything.</p> <p>13 Q. You didn't ask him to sign any</p> <p>14 papers, did you?</p> <p>15 A. No, I did not.</p> <p>16 MR. SUCKLE: Counsel, please</p> <p>17 hold on. Counsel, don't put papers in</p> <p>18 front of the Witness while I'm asking</p> <p>19 her questions.</p> <p>20 MR. CALLAN: You are having her</p> <p>21 looking at the chart.</p> <p>22 MR. RADOMISLI: She is allowed</p> <p>23 to go through the chart.</p> <p>24 MR. SUCKLE: I didn't stop her</p> <p>25 from doing anything.</p>
<p style="text-align: right;">Page 175</p> <p>1 L. ALDANA-BERNIER</p> <p>2 upstairs in the inpatient unit.</p> <p>3 Q. How does a patient know they</p> <p>4 were entitled to a lawyer when they go</p> <p>5 upstairs?</p> <p>6 A. It's posted on the wall.</p> <p>7 Q. It's posted on the wall?</p> <p>8 A. Yes.</p> <p>9 Q. Is there anything else that the</p> <p>10 hospital did to advise him of his right</p> <p>11 to have a lawyer?</p> <p>12 MR. RADOMISLI: Objection to</p> <p>13 form.</p> <p>14 MR. CALLAN: I join in the</p> <p>15 objection, but you can answer.</p> <p>16 A. You are asking me if the</p> <p>17 hospital has anything? It's posted on</p> <p>18 the wall. I think that's part of</p> <p>19 hospital being able to make the patient</p> <p>20 aware they have legal representation.</p> <p>21 Q. Did you give him any papers</p> <p>22 that indicated that he can make a phone</p> <p>23 call to somebody to get help?</p> <p>24 A. There are free phone calls.</p> <p>25 Phones are on the walls. They are free</p>	<p style="text-align: right;">Page 177</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Please don't put papers in front</p> <p>3 of the Witness so she can answer the</p> <p>4 question the way you want her to.</p> <p>5 MR. CALLAN: You're referring to</p> <p>6 a piece of paper that's in the chart?</p> <p>7 Aren't you trying to find out</p> <p>8 what happened, Counsel?</p> <p>9 MR. SUCKLE: Can you not put a</p> <p>10 piece of paper in front of her again?</p> <p>11 Did you do that?</p> <p>12 MR. CALLAN: Is it in the chart?</p> <p>13 MR. SUCKLE: Did you put a piece</p> <p>14 of paper in front of her?</p> <p>15 MR. CALLAN: Yeah.</p> <p>16 MR. SUCKLE: Please don't do</p> <p>17 that while I'm questioning.</p> <p>18 MR. CALLAN: Your cocounsel has</p> <p>19 been handing her the same paper all</p> <p>20 morning from the chart.</p> <p>21 MR. SUCKLE: You have a chance</p> <p>22 to ask her whatever questions you</p> <p>23 want.</p> <p>24 MR. CALLAN: You are being quite</p> <p>25 disingenuous when you're questioning a</p>

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<p style="text-align: right;">Page 178</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Witness about a piece of paper you</p> <p>3 know is in the chart regarding --</p> <p>4 MR. SUCKLE: Keep talking on the</p> <p>5 record and the sanction motion will be</p> <p>6 --</p> <p>7 MR. CALLAN: I can't wait to see</p> <p>8 your sanction motion --</p> <p>9 MR. SUCKLE: Keep talking.</p> <p>10 MR. CALLAN: When the Court sees</p> <p>11 another seven-hour deposition about</p> <p>12 one chart entry.</p> <p>13 MR. SUCKLE: Keep going.</p> <p>14 MR. CALLAN: Which has been</p> <p>15 basically the pattern in this case.</p> <p>16 MR. SUCKLE: You don't think</p> <p>17 Judge Sweet cares what you're talking</p> <p>18 about?</p> <p>19 MR. SHAFFER: Call him and find</p> <p>20 out instead of arguing.</p> <p>21 MR. CALLAN: Unlike you, I don't</p> <p>22 choose to look into Judge Sweet's mind</p> <p>23 how he views this deposition. I will</p> <p>24 let the record speak for itself.</p> <p>25 MR. SMITH: The record should</p>	<p style="text-align: right;">Page 180</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Witness's lawyer.</p> <p>3 I would like to see the document</p> <p>4 is handed to the Witness while she was</p> <p>5 answering a question.</p> <p>6 Are you going to show me the</p> <p>7 document or not or do I assume the</p> <p>8 record speaks for itself?</p> <p>9 MR. CALLAN: Make a motion,</p> <p>10 Counsel, all right?</p> <p>11 MR. SMITH: So the record is</p> <p>12 clear that I'm asking for the piece of</p> <p>13 paper, Counsel is not giving it to me.</p> <p>14 I saw it. I know exactly what it was.</p> <p>15 MR. CALLAN: I don't have the</p> <p>16 piece of paper. You can look through</p> <p>17 the chart to see if there is a piece</p> <p>18 of paper relating to Counsel and what</p> <p>19 is routinely told concerning --</p> <p>20 Q. When a patient comes into the</p> <p>21 hospital, was Mr. Schoolcraft required to</p> <p>22 give his clothes up, to get out of his</p> <p>23 clothes?</p> <p>24 A. Give his clothes?</p> <p>25 Q. Was he required to take off his</p>
<p style="text-align: right;">Page 179</p> <p>1 L. ALDANA-BERNIER</p> <p>2 reflect you tried to show the Witness</p> <p>3 a document which is the form she</p> <p>4 filled out that contains, among other</p> <p>5 things, a list of that you fully</p> <p>6 know --</p> <p>7 MR. CALLAN: Let's identify the</p> <p>8 record.</p> <p>9 THE WITNESS: I'm sorry.</p> <p>10 MR. SMITH: Let's mark the</p> <p>11 document you tried to show the Witness</p> <p>12 while she was in the middle of</p> <p>13 answering the question. Let's do that</p> <p>14 okay. Come on.</p> <p>15 MR. CALLAN: Counsel for the</p> <p>16 hospital --</p> <p>17 MR. SMITH: I would like to have</p> <p>18 the court reporter mark this document.</p> <p>19 MR. RADOMISLI: This is my copy.</p> <p>20 There is one in the chart.</p> <p>21 MR. SMITH: Show me what it was</p> <p>22 you were trying to show the Witness.</p> <p>23 MR. RADOMISLI: I didn't show</p> <p>24 anything to the Witness.</p> <p>25 MR. SMITH: I'm talking to the</p>	<p style="text-align: right;">Page 181</p> <p>1 L. ALDANA-BERNIER</p> <p>2 clothes when he came into the hospital?</p> <p>3 A. Yes, he has to wear hospital</p> <p>4 gown.</p> <p>5 Q. So Mr. Schoolcraft when he was</p> <p>6 brought in in handcuffs, did he have to</p> <p>7 remove his pants?</p> <p>8 A. Yes.</p> <p>9 Q. Did he have to remove his</p> <p>10 shirt?</p> <p>11 A. Yes, has to be in a hospital</p> <p>12 gown.</p> <p>13 Q. Did he have to remove his</p> <p>14 socks?</p> <p>15 A. Yes.</p> <p>16 Q. Did he have to remove his</p> <p>17 underwear?</p> <p>18 A. Yes.</p> <p>19 Q. Did he have to turn over his</p> <p>20 money?</p> <p>21 A. Yes, they put in the safe.</p> <p>22 Q. Did he have to turn over his</p> <p>23 cell phone?</p> <p>24 A. Yes.</p> <p>25 Q. Did he have to turn over all of</p>

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<p style="text-align: right;">Page 182</p> <p>1 L. ALDANA-BERNIER 2 his personal belonging to Jamaica 3 Hospital? 4 MR. RADOMISLI: Objection to 5 form. 6 MR. CALLAN: Objection to form 7 too. 8 Are you saying for safekeeping 9 or asking -- 10 MR. SUCKLE: I asked the 11 question, Counselor. I think it's 12 pretty clear. 13 Q. Did he have to turn over his 14 personal belongings on his body to 15 Jamaica Hospital? 16 MR. RADOMISLI: Objection. 17 MR. CALLAN: Objection. 18 A. When they come into the 19 hospital, they usually tell them to 20 undress and then they put all of their 21 belonging to the safe and put a hospital 22 gown on. 23 Q. When you say "they," what do 24 you mean? 25 A. The nurses tell the patients.</p>	<p style="text-align: right;">Page 184</p> <p>1 L. ALDANA-BERNIER 2 form. 3 A. If anything, he would have been 4 searched in the medical ER. Then they 5 have to put him in a hospital gown. 6 And these items would have been 7 transferred with the patient to the psych 8 ER so that they can go to the safe. 9 Q. You talked about the search. 10 What is the search? 11 A. They search every patient to 12 make sure no contraband. 13 Q. When you say "search," did they 14 do a cavity search? 15 A. No, just take off the clothes, 16 make sure they are not carrying anything 17 like weapons, knives, anything they are 18 hiding in their socks or on their bodies. 19 Q. So they have to be completely 20 naked and observed to see they have no 21 weapons, to see they have to weapons, 22 correct? 23 A. They have to take off 24 everything, yes. 25 Q. Is this observation done by a</p>
<p style="text-align: right;">Page 183</p> <p>1 L. ALDANA-BERNIER 2 Q. Who is they, when they have to 3 do something? 4 A. They will, the nurses will ask 5 the patient to take off their clothes and 6 surrender their belonging to the nurse so 7 they can put their belongings to the 8 safe. 9 Q. What is it Mr. Schoolcraft was 10 given to wear after he had to give his 11 clothes to Jamaica Hospital? 12 MR. RADOMISLI: Objection to 13 form. 14 A. Can you clarify? 15 Q. What is it, if anything, he was 16 wearing after he gave his clothes to 17 Jamaica Hospital? 18 A. This is asked of every patient 19 to give their belongs because then they 20 check them. 21 Q. I understand. 22 What was Mr. Schoolcraft 23 wearing, if anything, after he gave his 24 clothes to Jamaica Hospital? 25 MR. RADOMISLI: Objection to</p>	<p style="text-align: right;">Page 185</p> <p>1 L. ALDANA-BERNIER 2 doctor, a nurse, somebody else? 3 A. Done by a nurse. 4 Q. Was that process done by Mr. 5 Schoolcraft with a woman, a male, do you 6 know? 7 A. This I wouldn't know. I wasn't 8 there. 9 Q. Was he handcuffed while that 10 was going on? 11 A. That I don't know because I was 12 wasn't there. 13 Q. Did they look in his mouth? 14 MR. CALLAN: She said she wasn't 15 there. Objection. 16 Are you asking about routine 17 searches or about this search? She 18 wasn't there for this search, Counsel. 19 Q. Does the search include looking 20 into Mr. Schoolcraft's mouth? 21 MR. CALLAN: Objection to the 22 form of the question. 23 A. I don't know because I wasn't 24 there. 25 Q. Have you been present for these</p>

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<p style="text-align: right;">Page 186</p> <p>1 L. ALDANA-BERNIER</p> <p>2 searches when they are done? Have you</p> <p>3 ever been present for the search when</p> <p>4 they were done?</p> <p>5 A. It's been done by a nurse and</p> <p>6 the security officers of the hospital.</p> <p>7 Q. So the security officer and the</p> <p>8 nurses do the search?</p> <p>9 A. Yes.</p> <p>10 Q. And the security officer, what</p> <p>11 is the medical training, if any, of a</p> <p>12 security officer?</p> <p>13 MR. RADOMISLI: Objection.</p> <p>14 MR. CALLAN: I join in the</p> <p>15 objection.</p> <p>16 Q. If you know? Is it a</p> <p>17 nonmedical person?</p> <p>18 A. He was part of team. He is</p> <p>19 nonmedical, but he is part of team.</p> <p>20 Q. So we have the nurse, the</p> <p>21 security guard, Mr. Schoolcraft standing</p> <p>22 naked and being examined --</p> <p>23 MR. CALLAN: Objection.</p> <p>24 Q. -- is that the process?</p> <p>25 MR. CALLAN: She said she wasn't</p>	<p style="text-align: right;">Page 188</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Was he free to go home?</p> <p>3 A. Not at the time. I don't think</p> <p>4 he was ready to go home.</p> <p>5 Q. How long had Mr. Schoolcraft</p> <p>6 been in the hospital as of the time that</p> <p>7 you wrote your note on November 2nd,</p> <p>8 2009?</p> <p>9 MR. RADOMISLI: Objection to the</p> <p>10 form.</p> <p>11 Q. Do you know how long he had</p> <p>12 been at the hospital?</p> <p>13 MR. RADOMISLI: Objection to the</p> <p>14 form.</p> <p>15 MR. CALLAN: I join in the</p> <p>16 objection.</p> <p>17 MR. LEE: Read that back.</p> <p>18 [The requested portion of the</p> <p>19 record was read.]</p> <p>20 A. Are you asking for the total</p> <p>21 number of days he was in Jamaica Hospital</p> <p>22 or --</p> <p>23 Q. When you wrote your note on</p> <p>24 November 2nd, 2009, he had already been</p> <p>25 in the hospital for three days?</p>
<p style="text-align: right;">Page 187</p> <p>1 L. ALDANA-BERNIER</p> <p>2 there.</p> <p>3 Is there a process?</p> <p>4 Q. Is that the process that Mr.</p> <p>5 Schoolcraft went through?</p> <p>6 A. That I don't know. I wasn't</p> <p>7 there.</p> <p>8 MR. RADOMISLI: Objection.</p> <p>9 Q. Do you understand that to be</p> <p>10 the process whereby all patients are</p> <p>11 asked to take their clothes off and they</p> <p>12 are examined by a nurse and security</p> <p>13 officer --</p> <p>14 MR. RADOMISLI: Objection.</p> <p>15 Q. -- in the emergency room. Is</p> <p>16 that your understanding?</p> <p>17 A. Every patient goes through</p> <p>18 this.</p> <p>19 Q. The answer is yes? Is the</p> <p>20 answer yes?</p> <p>21 A. Yes.</p> <p>22 Q. When you wrote your note on</p> <p>23 November 2nd, 2009, Mr. Schoolcraft told</p> <p>24 you he wanted to go home, correct?</p> <p>25 A. Yes.</p>	<p style="text-align: right;">Page 189</p> <p>1 L. ALDANA-BERNIER</p> <p>2 MR. RADOMISLI: Objection to</p> <p>3 form.</p> <p>4 Q. He came in October 31st at</p> <p>5 23:03, and now it's November 2nd at three</p> <p>6 o'clock in the afternoon, 3:10, correct?</p> <p>7 A. Then he was admitted upstairs</p> <p>8 to 11/6.</p> <p>9 Q. When you wrote your note, he</p> <p>10 had already been there two days?</p> <p>11 MR. RADOMISLI: Objection.</p> <p>12 KRETZ: Objection.</p> <p>13 MR. CALLAN: You can answer,</p> <p>14 Doctor, if you know.</p> <p>15 MR. KRETZ: Less than two days.</p> <p>16 A. November 2nd -- 31. He was</p> <p>17 there -- he came on the 1st. I was</p> <p>18 there, one, two days.</p> <p>19 Q. And Doctor, when did you write,</p> <p>20 fill out of the form that you signed with</p> <p>21 regard to the mental hygiene --</p> <p>22 MR. CALLAN: Asked and answered.</p> <p>23 Q. The next day?</p> <p>24 MR. CALLAN: She said November</p> <p>25 3rd. Asked and answered.</p>

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<p style="text-align: right;">Page 190</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. It was the next day, yes.</p> <p>3 Q. Why did you wait till the next</p> <p>4 day to fill out that form?</p> <p>5 A. That's when he was going</p> <p>6 upstairs to the inpatient unit.</p> <p>7 Q. Where was he from November 2nd,</p> <p>8 at 3:10 until he went upstairs?</p> <p>9 A. He was in the psych ER.</p> <p>10 Q. Why did he stay in the psych ER</p> <p>11 after you saw him on November 2nd, 2009?</p> <p>12 A. Why did he stay in the psych</p> <p>13 ER? I do not know what happened in 2009.</p> <p>14 Maybe there were no beds available, I</p> <p>15 have to let him wait in the emergency</p> <p>16 room.</p> <p>17 Q. Did you do your mental status</p> <p>18 examination of Mr. Schoolcraft on</p> <p>19 November 2nd, 2009, November 3rd, 2009</p> <p>20 2009, or some other date?</p> <p>21 A. It was on November 2nd.</p> <p>22 Q. When you did your mental status</p> <p>23 examination of Mr. Schoolcraft, did you</p> <p>24 make -- let's go back.</p> <p>25 Did you take a history of Mr.</p>	<p style="text-align: right;">Page 192</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Am I correct?</p> <p>3 MR. RADOMISLI: Objection to</p> <p>4 form.</p> <p>5 A. That's correct.</p> <p>6 Q. So the residents had evaluated</p> <p>7 him and made notes, correct?</p> <p>8 A. Yes.</p> <p>9 Q. And you were the director of</p> <p>10 the emergency room, correct?</p> <p>11 A. Correct.</p> <p>12 Q. And you had this patient in</p> <p>13 front of you, correct?</p> <p>14 A. Yes.</p> <p>15 Q. And you had the wherewithal,</p> <p>16 you had the chart in front of you,</p> <p>17 correct, when you saw the patient?</p> <p>18 A. That's correct.</p> <p>19 Q. And you had the ability and did</p> <p>20 in fact make notes in the chart, correct?</p> <p>21 A. That's correct.</p> <p>22 Q. Just so we are clear: You did</p> <p>23 not make any independent notes regarding</p> <p>24 your own findings during your</p> <p>25 examination, correct?</p>
<p style="text-align: right;">Page 191</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Schoolcraft?</p> <p>3 A. I spoke to Mr. Schoolcraft, and</p> <p>4 I did take a history on him.</p> <p>5 Q. Did you write that history</p> <p>6 down?</p> <p>7 A. No, because I did agree with</p> <p>8 the notes of the resident.</p> <p>9 Q. Did you make a note of what Mr.</p> <p>10 Schoolcraft told you regarding his</p> <p>11 history?</p> <p>12 A. It's -- all of the notes was in</p> <p>13 the resident notes.</p> <p>14 Q. And did you do a mental status</p> <p>15 examination of Mr. Schoolcraft in your</p> <p>16 presence?</p> <p>17 A. I did a mental status exam, and</p> <p>18 I agreed to the notes of the resident.</p> <p>19 Q. Am I correct other than the</p> <p>20 November 2nd, 2009 note, and the November</p> <p>21 3rd 2009 mental hygiene form that you</p> <p>22 filled out, you make no other notes in</p> <p>23 this chart?</p> <p>24 MR. RADOMISLI: Objection to</p> <p>25 form.</p>	<p style="text-align: right;">Page 193</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. That's correct. I agreed with</p> <p>3 the notes of the resident.</p> <p>4 Q. Doctor, do you believe not</p> <p>5 making any notes regarding your</p> <p>6 examination and findings with regard to</p> <p>7 Mr. Schoolcraft was in the bounds of good</p> <p>8 and accepted medical practice?</p> <p>9 A. I have the residents that saw</p> <p>10 that patient and I agreed with their</p> <p>11 notes so that is my -- the agreement with</p> <p>12 regards to the notes of the residents</p> <p>13 since I agreed with the above, I</p> <p>14 considered that as my notes.</p> <p>15 Q. I understand when you say you</p> <p>16 considered it.</p> <p>17 The question is: Does good and</p> <p>18 accepted medical practice require you to</p> <p>19 make your own notes regarding your</p> <p>20 examination and assessment of the</p> <p>21 patient?</p> <p>22 MR. CALLAN: Objection to the</p> <p>23 form of the question.</p> <p>24 You can answer.</p> <p>25 A. If I'm agreeing with notes of</p>

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<p style="text-align: right;">Page 194</p> <p>1 L. ALDANA-BERNIER</p> <p>2 the resident, then I do not have to write</p> <p>3 notes because I agree with the notes of</p> <p>4 the both residents from the first day</p> <p>5 that he came and the second note of Dr.</p> <p>6 Slowik.</p> <p>7 Q. Was Mr. Schoolcraft oriented to</p> <p>8 time?</p> <p>9 A. Yes.</p> <p>10 Q. Place?</p> <p>11 A. Yes.</p> <p>12 Q. He was oriented to time/space?</p> <p>13 A. Yes.</p> <p>14 Q. In your presence, correct?</p> <p>15 A. Yes.</p> <p>16 Q. His speech was normal, correct?</p> <p>17 A. That's correct.</p> <p>18 Q. He did not appear to be</p> <p>19 suffering from delusions in your</p> <p>20 presence, correct?</p> <p>21 A. He was paranoid.</p> <p>22 Q. But that's that delusions,</p> <p>23 correct?</p> <p>24 A. Persecutory delusions.</p> <p>25 Q. He wasn't seeing things, was</p>	<p style="text-align: right;">Page 196</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Any other way that he was</p> <p>3 manifesting besides that?</p> <p>4 A. He believed he was being</p> <p>5 persecuted by his superiors, coworkers,</p> <p>6 superiors, that's the main -- that's the</p> <p>7 conspiracy.</p> <p>8 MR. CALLAN: You have to keep</p> <p>9 your voice up.</p> <p>10 Q. So it was this conspiracy</p> <p>11 theory in his head that you thought was</p> <p>12 the --</p> <p>13 MR. SUCKLE: Withdrawn.</p> <p>14 Q. It was the conspiracy that was</p> <p>15 the basis of your opinion that he was</p> <p>16 paranoid, correct?</p> <p>17 A. Yes.</p> <p>18 Q. And how did that manifest</p> <p>19 itself, if at all: in a threat to his</p> <p>20 own physical harm?</p> <p>21 A. If I look at him as being a</p> <p>22 police officer talking about this</p> <p>23 conspiracy theory and then I'm thinking</p> <p>24 that he has access to weapons, then I</p> <p>25 would think that I should think twice and</p>
<p style="text-align: right;">Page 195</p> <p>1 L. ALDANA-BERNIER</p> <p>2 he?</p> <p>3 A. That's hallucinations, no.</p> <p>4 Q. He wasn't hallucinating, was</p> <p>5 he?</p> <p>6 A. No.</p> <p>7 Q. How about his cognitive</p> <p>8 functioning, that was normal, correct?</p> <p>9 A. Yes.</p> <p>10 MR. RADOMISLI: Off the record.</p> <p>11 [Discussion held off the</p> <p>12 record.]</p> <p>13 MR. SMITH: It's 3:34. Off the</p> <p>14 record.</p> <p>15 [Whereupon, at 3:34 p.m., a</p> <p>16 recess was taken.]</p> <p>17 [Whereupon, at 3:49 p.m., the</p> <p>18 testimony continued.]</p> <p>19 MR. SMITH: Back on the record</p> <p>20 3:49 p.m.</p> <p>21 Q. Doctor, the paranoia that you</p> <p>22 diagnosed Mr. Schoolcraft with, how was</p> <p>23 he manifesting that?</p> <p>24 A. By him saying that there was a</p> <p>25 conspiracy against him.</p>	<p style="text-align: right;">Page 197</p> <p>1 L. ALDANA-BERNIER</p> <p>2 be cautious that he could be a danger to</p> <p>3 himself or to others.</p> <p>4 Q. Is that the entirety of the</p> <p>5 reason that you came to the opinion he</p> <p>6 was a danger to himself and others?</p> <p>7 MR. CALLAN: Objection to form.</p> <p>8 MR. LEE: Objection to form.</p> <p>9 A. The fact that he had to be</p> <p>10 brought in from his house where he</p> <p>11 barricaded himself and he had to be taken</p> <p>12 away and he was bizarre and agitated at</p> <p>13 the time when he was brought in from his</p> <p>14 home, I think those are all the factors</p> <p>15 that you have to take in consideration</p> <p>16 because then I am trying to -- the reason</p> <p>17 why I kept him is because I'm trying to</p> <p>18 prevent a disaster.</p> <p>19 MR. SMITH: I'm sorry what was</p> <p>20 the last part?</p> <p>21 [The requested portion of the</p> <p>22 record was read.]</p> <p>23 Q. Prevent a disaster to whom?</p> <p>24 A. Obviously, if you hear all of</p> <p>25 the stories about the Navy yard disaster,</p>

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<p style="text-align: right;">Page 198</p> <p>1 L. ALDANA-BERNIER 2 the Range Rover disaster with cops. If 3 you try to fast forward with an 4 individual. I'm trying to prevent things 5 that will happened. 6 As an emergency room doctor, 7 you always have to think of all of the 8 factors that will make a person a danger 9 to others like presence of weapons, does 10 he have accessibility to weapons and he 11 was paranoid. 12 At the time I was thinking that 13 maybe he was really a danger to himself. 14 Q. So a paranoid person, 15 accessible to weapons, made him a danger 16 to himself and others? 17 A. Plus the other information that 18 we got when they went to his house: They 19 have to take him out from his house; he 20 was barricaded in his house; and he was 21 agitated at the time when he was in the 22 emergency room. 23 You have to take all of those 24 into consideration and find out why was 25 he behaving this way. You cannot see</p>	<p style="text-align: right;">Page 200</p> <p>1 L. ALDANA-BERNIER 2 barricading himself in your presence, 3 right? 4 A. At that moment but then you 5 have to consider -- at that moment when 6 you make your decision, you also have to 7 consider all of the other factors. 8 Q. Why didn't you read the medical 9 record from the medical emergency room? 10 A. Because the medical record 11 doesn't come to our psych ER. 12 Q. Did you speak to any of the 13 police officers that brought him to the 14 hospital? 15 A. I do not have any recollection. 16 I do not remember. 17 Q. Did you speak to any police 18 officer at all at any time regarding Mr. 19 Schoolcraft? 20 A. I do not remember. 21 Q. Did you speak to Dr. Lamstein? 22 MR. SMITH: L-A-M-S-T-E-I-N. 23 A. No. 24 Q. Did you tell Dr. Lamstein 25 that --</p>
<p style="text-align: right;">Page 199</p> <p>1 L. ALDANA-BERNIER 2 that kind of behavior in just one day. 3 You have to observe the patient. 4 Q. By the time that you wrote your 5 note on the 3rd, he had now been there 6 for two and a half, three days, correct? 7 MR. RADOMISLI: Objection to the 8 form. 9 Been where? 10 MR. SUCKLE: At Jamaica 11 Hospital. 12 A. He was in the emergency room 13 then. I made my decision at the time 14 that I saw him that he needed to be 15 admitted. 16 Q. But he wasn't exhibiting 17 anything other than the paranoia when you 18 saw him, he didn't exhibit any of that, 19 correct: The things you just described 20 as agitation or the barricading, that was 21 not in your presence, correct? 22 A. No. He was paranoid. He said 23 all of the stories that maybe there was a 24 conspiracy against him. 25 Q. But he wasn't agitated or</p>	<p style="text-align: right;">Page 201</p> <p>1 L. ALDANA-BERNIER 2 MR. CALLAN: Didn't she just say 3 she didn't speak to Dr. Lamstein? 4 Objection. 5 Q. Did you ever tell Dr. Lamstein 6 that Mr. Schoolcraft did not need 7 psychiatric care? 8 MR. CALLAN: Are you asking if 9 she used telepathy since she didn't 10 speak to the doctor? 11 Q. Did you say that to -- 12 A. I haven't spoken to Dr. 13 Lamstein. 14 Q. So if Dr. Lamstein said that 15 you told her that Mr. Schoolcraft did not 16 need psychiatric care, she would not be 17 telling the truth; is that what you're 18 saying? 19 MR. CALLAN: Objection to the 20 form of the question. 21 A. You are asking me if Dr. 22 Lamstein tells me that he doesn't need 23 admission, am I going to change my mind? 24 Q. No. If Dr. Lamstein testified 25 that you told Dr. Lamstein that Mr.</p>

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<p style="text-align: right;">Page 202</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Schoolcraft did not need psychiatric</p> <p>3 admission, would she be lying?</p> <p>4 MR. CALLAN: Objection to the</p> <p>5 form of the question.</p> <p>6 A. This is the first time I'm</p> <p>7 hearing about Dr. Lamstein.</p> <p>8 Q. Did you ever hear the name Dr.</p> <p>9 Lamstein before?</p> <p>10 A. No, the first time I'm hearing</p> <p>11 about Lamstein.</p> <p>12 Q. Did you ever speak to anybody</p> <p>13 from the internal affairs bureau of the</p> <p>14 police department?</p> <p>15 A. Excuse me?</p> <p>16 Q. Did you ever speak to anybody</p> <p>17 from the internal affairs bureau of the</p> <p>18 police department?</p> <p>19 A. No.</p> <p>20 Q. Were you the admitting</p> <p>21 physician for Mr. Schoolcraft to the</p> <p>22 psych emergency room?</p> <p>23 A. In the emergency room, yes.</p> <p>24 Q. Do you know the name of the</p> <p>25 person that brought Mr. Schoolcraft in?</p>	<p style="text-align: right;">Page 204</p> <p>1 L. ALDANA-BERNIER</p> <p>2 therapeutic," what do you mean?</p> <p>3 A. If you are getting 0.5</p> <p>4 milligrams twice a day, 1 milligram, yes.</p> <p>5 Q. How long does it take before it</p> <p>6 becomes effective to become therapeutic?</p> <p>7 MR. CALLAN: Objection.</p> <p>8 Q. At the dosage that you</p> <p>9 prescribed at the weight that Mr.</p> <p>10 Schoolcraft was?</p> <p>11 MR. CALLAN: Objection.</p> <p>12 A. Most likely a week.</p> <p>13 Q. And when people come in and are</p> <p>14 dangerous, have you prescribed medication</p> <p>15 that they have rejected and refused to</p> <p>16 take? Has that ever happened to you</p> <p>17 where a patient refuses to take medicine</p> <p>18 and you have decided the patient is a</p> <p>19 danger to themselves or others?</p> <p>20 A. Before we start any medication,</p> <p>21 you describe it with the patient which</p> <p>22 you need informed consent and you talk</p> <p>23 about the side effects, the consequences,</p> <p>24 and the benefits of taking or not taking</p> <p>25 medication.</p>
<p style="text-align: right;">Page 203</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. No, I don't.</p> <p>3 Q. Did you prescribe any</p> <p>4 medication for Mr. Schoolcraft?</p> <p>5 A. Risperdal, 0.5 milligrams.</p> <p>6 That was written by the resident, but I</p> <p>7 agreed; Risperdal 0.5 milligrams twice a</p> <p>8 day.</p> <p>9 Q. What is that?</p> <p>10 A. That's an antipsychotic.</p> <p>11 Q. Antipsychotic?</p> <p>12 A. Paranoia, psychosis.</p> <p>13 Q. What was the dosage?</p> <p>14 A. It's 0.5.</p> <p>15 Q. What was his weight?</p> <p>16 A. Weight, 109 kilograms.</p> <p>17 Q. And the dosage that you</p> <p>18 prescribed, is that an introductory dose?</p> <p>19 MR. LEE: Objection to form.</p> <p>20 A. Yes.</p> <p>21 Q. So it's not really therapeutic</p> <p>22 at that level, correct?</p> <p>23 A. It's twice a day. It should be</p> <p>24 therapeutic.</p> <p>25 Q. When you say "it should be</p>	<p style="text-align: right;">Page 205</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Have you ever medicated a</p> <p>3 patient against their will because they</p> <p>4 were a danger to themselves or others?</p> <p>5 A. They are a danger to</p> <p>6 themselves, if they are agitated, they</p> <p>7 are violent, yes, I medicated someone</p> <p>8 against their will.</p> <p>9 Q. How did you do that?</p> <p>10 A. If they are becoming -- if the</p> <p>11 emergency room is being chaotic and the</p> <p>12 patient -- first you speak with the</p> <p>13 patient and you try to redirect the</p> <p>14 patient, try to calm him down. If he</p> <p>15 doesn't agree or if he doesn't listen to</p> <p>16 your redirection, then you start telling</p> <p>17 him that you are going to medicate him.</p> <p>18 Q. And physically, how do you do</p> <p>19 that, how do you medicate the person who</p> <p>20 resists taking the medicine?</p> <p>21 A. We give them intramuscular.</p> <p>22 Q. Someone will restrain them and</p> <p>23 give them a shot, correct?</p> <p>24 A. Yes.</p> <p>25 Q. You did not have the opinion</p>

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<p style="text-align: right;">Page 206</p> <p>1 L. ALDANA-BERNIER 2 that Mr. Schoolcraft needed to go through 3 the process of being medicated against 4 his will, correct? 5 A. At the time in the ER, at that 6 point in time when he was in the ER, he 7 was not given any intramuscular 8 injection. 9 Q. Mr. Schoolcraft refused to take 10 the medication that you prescribed, 11 correct? 12 A. Yes. 13 Q. And you did not go through this 14 process where you went through having him 15 restrained and giving him the shot, you 16 didn't go through that process with him, 17 correct? 18 A. No, I didn't. 19 Q. Because you didn't deem it 20 necessary to do that to Mr. Schoolcraft, 21 correct? 22 A. At the point he was in the ER, 23 he was not agitated so I did not have to 24 give him an injection. 25 Q. He wasn't such a threat to</p>	<p style="text-align: right;">Page 208</p> <p>1 L. ALDANA-BERNIER 2 A. Next to the chairman. 3 Q. Who is the chairman? 4 A. Dr. Vivek. 5 Q. Can you spell that? 6 A. V-I-V-E-K. 7 Q. When you say you spoke to him, 8 did you speak to him on the phone or you 9 don't recall? 10 A. Call him downstairs and I 11 presented the case to him. 12 Q. When you say "you presented the 13 case to him," did you tell him about the 14 history that you took? 15 A. Yes. 16 Q. Do you remember actually having 17 this conversation, or is that your 18 standard practice that you described? 19 A. When it's a decision, like, 20 when a decision has to be made wherein -- 21 I would say it's standard practice. 22 Q. You don't recall actually 23 having the conversation? 24 A. I recall that I spoke to him. 25 Q. You recall in this case</p>
<p style="text-align: right;">Page 207</p> <p>1 L. ALDANA-BERNIER 2 anybody that he was going to need that 3 type of restraint and then injection, 4 correct? 5 A. He was not agitated at the time 6 so I didn't have to inject him. 7 Q. You indicated that you wanted a 8 second opinion earlier, correct? 9 A. Yes. 10 Q. Did you write a request for a 11 second opinion or a consult? 12 A. No, I just have to call my 13 associate chairman and present to him the 14 case, and I spoke with him and he agreed 15 with me. 16 Q. Who is the doctor that you 17 called? 18 A. Associate chairman. 19 Q. Who is the associate chairman 20 that you spoke with? 21 A. Dr. Dhar, D-H-A-R. 22 Q. Dr. Dhar is a psychiatrist? 23 A. Yes. 24 Q. Dr. Dhar is his associate 25 chairman. What is that?</p>	<p style="text-align: right;">Page 209</p> <p>1 L. ALDANA-BERNIER 2 speaking to him? 3 A. Speaking to him. 4 Q. What time of day did you speak 5 to him? 6 A. That was the afternoon. 7 Q. And is the associate chairman 8 the person that you generally call to get 9 a second opinion for admission under the 10 Mental Hygiene Law? 11 A. Yes. 12 Q. Why do you recall this 13 particular incident with regard to Mr. 14 Schoolcraft when you got the second 15 opinion: Is there anything that brings 16 it to your mind? 17 A. I recall that because every 18 police officer that comes to our 19 hospital, I try to get second opinion. 20 Q. When you say "every police 21 officer," how often have you had police 22 officers brought to your hospital to the 23 emergency psych ward? 24 A. I could not recall how many. 25 Q. Hundreds?</p>

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<p style="text-align: right;">Page 210</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. No.</p> <p>3 Q. Dozens?</p> <p>4 A. No. That's why it came back in</p> <p>5 memory because it's not 100, but I cannot</p> <p>6 recall how many.</p> <p>7 Q. More than ten?</p> <p>8 A. I don't remember.</p> <p>9 Q. Less than 50?</p> <p>10 A. I would not remember.</p> <p>11 Q. On each of these occasions,</p> <p>12 were they brought in by other members of</p> <p>13 the New York City Police Department?</p> <p>14 A. Yes.</p> <p>15 MR. RADOMISLI: What?</p> <p>16 THE WITNESS: Yes.</p> <p>17 Q. On each of those occasions, did</p> <p>18 you admit those patients to the psych ER?</p> <p>19 A. To the psych ER, yes.</p> <p>20 Q. On each of those occasions, did</p> <p>21 the associate chairman agree with your</p> <p>22 opinion to admit these police officers</p> <p>23 under the --</p> <p>24 MR. CALLAN: Objection to the</p> <p>25 question. I don't know that she said</p>	<p style="text-align: right;">Page 212</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Do you know, did you get to see</p> <p>3 any of the police officers on a recurring</p> <p>4 basis that would bring these police</p> <p>5 officer in; in other words, the police</p> <p>6 officers that would bring the other</p> <p>7 police officer in for evaluation, did you</p> <p>8 see those police officers more than once?</p> <p>9 MR. RADOMISLI: Objection to</p> <p>10 form.</p> <p>11 A. What do you mean more than</p> <p>12 once?</p> <p>13 Q. Like in this case we know that</p> <p>14 Sergeant James played some role in Mr.</p> <p>15 Schoolcraft's history, correct?</p> <p>16 MR. SHAFFER: Objection.</p> <p>17 A. That's in the record.</p> <p>18 Q. Do you know if Sergeant James</p> <p>19 was involved in any of the other police</p> <p>20 officers who were admitted to Jamaica</p> <p>21 Hospital who you admitted under the</p> <p>22 Mental Hygiene Law?</p> <p>23 A. I don't know how Mr. James look</p> <p>24 like.</p> <p>25 Q. Were there any police officers,</p>
<p style="text-align: right;">Page 211</p> <p>1 L. ALDANA-BERNIER</p> <p>2 she consulted with the associate</p> <p>3 chairman on every case.</p> <p>4 MR. SUCKLE: I will clarify.</p> <p>5 Q. For each of those police</p> <p>6 officers that were admitted under the</p> <p>7 Mental Hygiene Law, did you consult with</p> <p>8 a second opinion?</p> <p>9 A. Yes.</p> <p>10 Q. In each of those police</p> <p>11 officers, did the person, the doctor you</p> <p>12 consulted with, agree with your opinion</p> <p>13 to admit under the Mental Hygiene Law?</p> <p>14 A. Yes.</p> <p>15 Q. And these times when police</p> <p>16 officers were admitted under the Mental</p> <p>17 Hygiene Law, did some of them occur</p> <p>18 before Mr. Schoolcraft's admission? I</p> <p>19 mean in the year or months beforehand.</p> <p>20 A. Yes.</p> <p>21 Q. And did the police officers</p> <p>22 come from any particular precinct that</p> <p>23 you were talking about: Did they come</p> <p>24 from the 81st Precinct, if you know?</p> <p>25 A. I would not know that.</p>	<p style="text-align: right;">Page 213</p> <p>1 L. ALDANA-BERNIER</p> <p>2 sergeants, lieutenants who you can</p> <p>3 identify who would bring police officers</p> <p>4 to Jamaica Hospital on a recurring basis?</p> <p>5 MR. RADOMISLI: Objection to</p> <p>6 form.</p> <p>7 MR. SHAFFER: Objection.</p> <p>8 Q. That you know either by sight</p> <p>9 or name?</p> <p>10 A. No, I wouldn't.</p> <p>11 Q. When the police officers are</p> <p>12 brought in by the other members of the</p> <p>13 New York City Police Department, do you</p> <p>14 always have the same concerns that you</p> <p>15 describe for us about the police officer</p> <p>16 having access to weapons?</p> <p>17 MR. CALLAN: Objection to the</p> <p>18 form of the question.</p> <p>19 She didn't say they were brought</p> <p>20 in by other members of the New York</p> <p>21 City Police Department.</p> <p>22 MR. SUCKLE: We've been told</p> <p>23 that she did.</p> <p>24 Q. Does that concern that you</p> <p>25 expressed about Mr. Schoolcraft and the</p>

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<p style="text-align: right;">Page 214</p> <p>1 L. ALDANA-BERNIER</p> <p>2 access to weapons, did it apply to those</p> <p>3 other police officers that you admitted</p> <p>4 under the Mental Hygiene Law?</p> <p>5 A. I think you have to look at the</p> <p>6 case. It depends. Every case is</p> <p>7 different. You have to look at it</p> <p>8 differently.</p> <p>9 Q. So some police officers have</p> <p>10 access to weapons and some don't?</p> <p>11 A. That I wouldn't know.</p> <p>12 Q. You indicated one of your</p> <p>13 concerns for Mr. Schoolcraft's safety was</p> <p>14 that he had access to weapons.</p> <p>15 A. In the notes he mentioned why</p> <p>16 he cannot have access to his guns.</p> <p>17 Q. So were other police officers</p> <p>18 brought in who did have access to weapons</p> <p>19 that you are aware of?</p> <p>20 A. I do not remember that.</p> <p>21 Q. Did other police officers ever</p> <p>22 bring in another police officer to the</p> <p>23 emergency room who you did not admit</p> <p>24 under the Mental Hygiene Law?</p> <p>25 A. That would be hard to remember.</p>	<p style="text-align: right;">Page 216</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Was Mr. Schoolcraft the last</p> <p>3 police officer that you admitted under</p> <p>4 the Mental Hygiene Law?</p> <p>5 A. I do not know if he was the</p> <p>6 last one.</p> <p>7 MR. RADOMISLI: Read that back.</p> <p>8 [The requested portion of the</p> <p>9 record was read.]</p> <p>10 Q. But none come to memory since</p> <p>11 Mr. Schoolcraft, correct?</p> <p>12 A. I'm not sure. I don't</p> <p>13 remember.</p> <p>14 Q. And going to your November 3rd</p> <p>15 note where you fill out the mental status</p> <p>16 exam form, can we turn to that, please.</p> <p>17 [Witness complying.]</p> <p>18 Q. Look first at --</p> <p>19 A. Yes.</p> <p>20 Q. -- that's stamped at the top</p> <p>21 "Emergency Admission Section 9.39 Mental</p> <p>22 Hygiene Law." At the bottom is your</p> <p>23 signature?</p> <p>24 A. Yes.</p> <p>25 Q. Is that what we are all talking</p>
<p style="text-align: right;">Page 215</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. As you sit here today, you</p> <p>3 don't recall any such situations; am I</p> <p>4 correct?</p> <p>5 MR. RADOMISLI: Objection.</p> <p>6 MR. CALLAN: Objection to form.</p> <p>7 What situation: admitting or not?</p> <p>8 MR. SUCKLE: Not admitting.</p> <p>9 Q. As you sit here today, do you</p> <p>10 recall any occurrence of a police officer</p> <p>11 being brought in by other police officers</p> <p>12 and you did not admit them under mental</p> <p>13 hygiene?</p> <p>14 MR. RADOMISLI: Objection.</p> <p>15 A. It would be hard to remember.</p> <p>16 Q. So the answer is: As you sit</p> <p>17 here, no, you don't remember?</p> <p>18 MR. RADOMISLI: Objection to</p> <p>19 form.</p> <p>20 A. I do not remember.</p> <p>21 Q. When is the last time you</p> <p>22 admitted a police officer under the</p> <p>23 Mental Hygiene Law into the psych</p> <p>24 emergency room?</p> <p>25 A. Do not remember.</p>	<p style="text-align: right;">Page 217</p> <p>1 L. ALDANA-BERNIER</p> <p>2 about, is that what you have in front of</p> <p>3 you?</p> <p>4 A. Yes.</p> <p>5 Q. Is this all of your</p> <p>6 handwriting?</p> <p>7 A. Yes.</p> <p>8 Q. And going to the part that</p> <p>9 says, "record of admission," what did you</p> <p>10 write there?</p> <p>11 A. "Patient is a danger to</p> <p>12 himself. Currently psychotic and</p> <p>13 paranoid. Would benefit from inpatient</p> <p>14 stabilization."</p> <p>15 Q. I'm sorry. I didn't get all of</p> <p>16 that?</p> <p>17 A. Would benefit from inpatient</p> <p>18 stabilization.</p> <p>19 Q. I didn't hear before will</p> <p>20 benefit.</p> <p>21 [The requested portion of the</p> <p>22 record was read.]</p> <p>23 Q. When you say he would benefit</p> <p>24 from it, what do you mean?</p> <p>25 A. Benefit from inpatient</p>

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<p style="text-align: right;">Page 218</p> <p>1 L. ALDANA-BERNIER  2 stabilization because when you go up to  3 the inpatient unit, you will have a  4 psychiatrist, a therapist, and a team  5 that will work with you. There are  6 groups in the inpatient unit and there  7 are other modalities of the kind of  8 treatment in the inpatient unit that will  9 be able to maybe find out why he was  10 behaving the way he was behaving or why  11 he was paranoid, and he will be able to  12 talk to a psychologist or the other  13 therapist.  14 Q. The stabilization, was that a  15 stabilization of his affect, his  16 environment that was going to be  17 stabilized, what did you mean by that?  18 MR. CALLAN: Objection to form.  19 A. Stabilization means  20 stabilization of his psychosis and  21 stabilization of if there was any  22 emotional crisis that was he going on  23 [sic] or going through with the conflict  24 that he was having with the supervisors.  25 Q. So some type of resolution of</p>	<p style="text-align: right;">Page 220</p> <p>1 L. ALDANA-BERNIER  2 but everyone that comes in who are a  3 danger that we know they have access to  4 weapons, then we try as much as possible.  5 I don't know if you know about  6 the New York SAFE Act wherein we have to  7 report everyone that has a weapon, we  8 have to make sure that they are  9 discharged before....  10 Q. Usually you have to report  11 everyone that has a weapon, who do you  12 have to report that to?  13 A. The Department of Health.  14 Q. That's been the law for how  15 long?  16 A. Maybe -- that's new, a new law.  17 Q. Was that in effect in 2009?  18 A. Not 2009. What I was trying to  19 say that anyone we know that is a danger  20 to themselves, we try to make sure they  21 don't have any access to weapons.  22 Q. Looking at the date that you  23 wrote in there -- we have gone through  24 this. I don't want to spend too much  25 time on it; but did you actually cross</p>
<p style="text-align: right;">Page 219</p> <p>1 L. ALDANA-BERNIER  2 that conflict would be part of the  3 stabilization?  4 A. Yes.  5 Q. And that would have occurred  6 through the modalities that you just  7 described earlier?  8 A. Yes.  9 Q. And would the stabilization  10 also include limiting his access to  11 weapons?  12 A. Stabilization, that will  13 include, yes, because they will have to  14 find out before he is discharged to  15 ascertain he doesn't have any access to  16 weapons or....  17 Q. Is that stabilization something  18 that every police officer admitted under  19 the Mental Hygiene Law needs to go  20 through: making sure they don't have  21 access to weapons?  22 MR. RADOMISLI: Objection.  23 MR. CALLAN: I join in the  24 objection.  25 A. It's not only police officers</p>	<p style="text-align: right;">Page 221</p> <p>1 L. ALDANA-BERNIER  2 out the date of the admission and then  3 rewrite it?  4 A. I tried to put 11/1/2009.  5 Q. Did you check a.m. or p.m. on  6 this?  7 A. No, I did not check it, but  8 23:03 is --  9 Q. Military time?  10 A. -- military time, yes.  11 Q. From the time of your note on  12 the 2nd at 3:10 until this note on the  13 3rd at 1:20, was Mr. Schoolcraft free to  14 leave?  15 A. No, he was not.  16 I made my decision on the day  17 that I saw him.  18 Q. You made your decision on that  19 date and then turn to the Notice of  20 Status of Rights in Emergency Admission  21 which your counsel clearly decided to  22 throw in front of you before --  23 MR. CALLAN: Are we allowed to  24 look at it now because it's in the  25 record, Counsel?</p>

56 (Pages 218 - 221)



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1 L. ALDANA-BERNIER  
 2 Q. Did you sign that form?  
 3 A. Yes.  
 4 Q. On the 3rd, correct?  
 5 A. On the 3rd, yes.  
 6 Q. Did you sign that at the same  
 7 time that you signed the Emergency  
 8 Admission Section 9.39 Mental Hygiene  
 9 Law, that form?  
 10 A. Yes.  
 11 Q. What did you do with this form  
 12 once you signed it?  
 13 A. One copy goes to the patient.  
 14 Q. So Mr. Schoolcraft was given  
 15 this on the 3rd of November, 2009?  
 16 A. Yes.  
 17 Q. Did he sign it?  
 18 A. No. I am the one that signs  
 19 it.  
 20 Q. Did Mr. Schoolcraft ask you to  
 21 -- did you have any contact with Mr.  
 22 Schoolcraft's father?  
 23 A. No, I did not.  
 24 Q. Did Mr. Schoolcraft say, call  
 25 my father and tell him about this?

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1 L. ALDANA-BERNIER  
 2 A. No, he did not. I don't know.  
 3 I don't have any notes about him allowing  
 4 me to speak to his father.  
 5 Q. Do you know if you spoke to his  
 6 father while he was in the hospital?  
 7 A. Regarding the notes if I spoke  
 8 to the father?  
 9 Q. Did you write on here that his  
 10 father should be designated as the person  
 11 to be noticed of this admission?  
 12 A. No, I didn't write anything  
 13 here.  
 14 Q. Why not?  
 15 A. Because this belongs to him.  
 16 Q. When you say --  
 17 A. This is the for the patient.  
 18 Q. This is for the patient?  
 19 A. Yes.  
 20 Q. Do you know why there are these  
 21 lines indicating where copies should go?  
 22 A. It says, above patient has been  
 23 given a copy of that notice.  
 24 Q. Underneath that, what does it  
 25 say, it has your signature and underneath

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1 L. ALDANA-BERNIER  
 2 that, what does it say? Can you read  
 3 that into the record, please?  
 4 A. "Copies to persons designed by  
 5 patient to be informed of admission."  
 6 Q. Continue. "If," there is a  
 7 parenthesis there.  
 8 A. "If none type in none."  
 9 Q. Did you type in none?  
 10 A. No, I did not.  
 11 Q. Did you write in none?  
 12 A. No, I did not.  
 13 Q. Did you write in anybody's  
 14 name?  
 15 A. It's there, "Schoolcraft,  
 16 Adrian."  
 17 Q. Did you write anybody's name to  
 18 be designated by the patient to be  
 19 informed of his admission, did you write  
 20 any names there?  
 21 A. No, I didn't write any names.  
 22 Q. Do you have a recollection as  
 23 you sit here today independent of the  
 24 record, do you recall actually giving  
 25 this to Mr. Schoolcraft?

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1 L. ALDANA-BERNIER  
 2 A. I do not have an independent  
 3 recollection. The nurse could have given  
 4 it to him.  
 5 Q. So the nurse may have given it  
 6 to him?  
 7 A. Yes.  
 8 Q. Is this something that you  
 9 assigned the nurses to do from time to  
 10 time?  
 11 A. Either the nurse or I do. I do  
 12 not have a recollection if I gave it to  
 13 him. I will not know.  
 14 Q. Who is the person who write  
 15 none on it for people to designated if  
 16 none is the appropriate answer: you, the  
 17 nurse, something else?  
 18 A. I would.  
 19 Q. The second page of that  
 20 emergency admission form -- hold on one  
 21 second. Go back to that notice for the  
 22 second.  
 23 At the top of the notice there  
 24 appears to be a date. Can you tell me  
 25 the date that you wrote there?

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<p style="text-align: right;">Page 226</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. 11/1/09.</p> <p>3 Q. What does the form say in that</p> <p>4 box, what is the date of --</p> <p>5 A. "Date of arrival at hospital."</p> <p>6 Q. Did you first write 11/3 and</p> <p>7 then cross it out and make it 1?</p> <p>8 A. No, that's 11/1.</p> <p>9 Q. Did you cross out that middle</p> <p>10 number at all, the date?</p> <p>11 A. No, I put 1.</p> <p>12 Q. So there is no cross out or</p> <p>13 block out of that 1 where the 1 is now?</p> <p>14 A. I put a 1 in there.</p> <p>15 Q. Again, you put the 1 there</p> <p>16 because that's the date that you</p> <p>17 understand him to arrive at the psych ER,</p> <p>18 right?</p> <p>19 A. Yes.</p> <p>20 Q. As opposed to generally him</p> <p>21 arriving at the hospital, yes?</p> <p>22 A. Yes.</p> <p>23 Q. Is that something that you do</p> <p>24 when you fill out these forms when part</p> <p>25 of the form asked for date of arrival,</p>	<p style="text-align: right;">Page 228</p> <p>1 L. ALDANA-BERNIER</p> <p>2 director?</p> <p>3 A. Yes.</p> <p>4 Q. When did you stop?</p> <p>5 A. October 2013.</p> <p>6 Q. Was there a reason that you</p> <p>7 stopped being director?</p> <p>8 A. There was a change of</p> <p>9 administration.</p> <p>10 Q. Has there been changes of</p> <p>11 administration at any time in the ten</p> <p>12 years that you were director?</p> <p>13 A. No.</p> <p>14 Q. Looking at the second page of</p> <p>15 the emergency admission form, is any of</p> <p>16 this your handwriting?</p> <p>17 A. That belong to Dr. Isakov.</p> <p>18 Q. Did Dr. Vivek make any notes in</p> <p>19 the chart as to the associate chairman</p> <p>20 that you spoke to?</p> <p>21 MR. CALLAN: Vivek is the</p> <p>22 chairman.</p> <p>23 Q. I thought you said associate</p> <p>24 chairman.</p> <p>25 A. Associate chairman is Dr. Dhar</p>
<p style="text-align: right;">Page 227</p> <p>1 L. ALDANA-BERNIER</p> <p>2 did you put in the date they arrived at</p> <p>3 the psych ER?</p> <p>4 A. Yes.</p> <p>5 Q. As opposed to the date they</p> <p>6 actually arrive at the hospital itself?</p> <p>7 A. You're right.</p> <p>8 Q. Why do you do that?</p> <p>9 A. We usually put the date of the</p> <p>10 arrival when they come to the emergency</p> <p>11 room.</p> <p>12 Q. I understand that.</p> <p>13 Why don't you put the date of</p> <p>14 arrival at the hospital when that's what</p> <p>15 the form asked for?</p> <p>16 A. We do not use this in the</p> <p>17 medical ER. We use this in the psych ER.</p> <p>18 Q. Did you have any hand in</p> <p>19 creating this form as director?</p> <p>20 A. No.</p> <p>21 Q. This existed prior to you --</p> <p>22 A. Yes.</p> <p>23 Q. -- prior to you being director?</p> <p>24 A. Yes.</p> <p>25 Q. When did you stop being</p>	<p style="text-align: right;">Page 229</p> <p>1 L. ALDANA-BERNIER</p> <p>2 and chairman and Dr. Vivek.</p> <p>3 Q. You spoke to Dr. Dhar?</p> <p>4 A. Yes.</p> <p>5 Q. Did Dr. Dhar fill out any of</p> <p>6 these forms with regard to the mental</p> <p>7 hygiene admission?</p> <p>8 A. No.</p> <p>9 Q. So you just got a verbal on the</p> <p>10 phone by Dr. Dhar; is that what you're</p> <p>11 saying?</p> <p>12 MR. RADOMISLI: Objection.</p> <p>13 Q. Of your opinion?</p> <p>14 MR. CALLAN: Objection to the</p> <p>15 form of the question.</p> <p>16 Q. Did you speak to Dr. Dhar on</p> <p>17 the telephone?</p> <p>18 A. He came down.</p> <p>19 Q. He came down to the emergency</p> <p>20 room?</p> <p>21 A. [Indicating.]</p> <p>22 Q. When Dr. Dhar came down to the</p> <p>23 emergency room, you presented the case to</p> <p>24 him, correct?</p> <p>25 A. Yes.</p>

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<p style="text-align: right;">Page 230</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. And then what happened?</p> <p>3 A. And he agreed to my decision of</p> <p>4 admitting the patient.</p> <p>5 Q. Did he become the second</p> <p>6 physician under Mental Hygiene Law for</p> <p>7 admission?</p> <p>8 A. You only need one in an</p> <p>9 emergency admission.</p> <p>10 Q. But it needs to be confirmed</p> <p>11 eventually, correct?</p> <p>12 A. That is after 48 hours.</p> <p>13 Q. So you called him down just</p> <p>14 because you wanted a second opinion, not</p> <p>15 to confirm for the purposes of 48-hour</p> <p>16 requirement, correct?</p> <p>17 A. To discuss this case, yes.</p> <p>18 Q. Was there something you were</p> <p>19 unsure of, is that why you wanted Dr.</p> <p>20 Dhar's opinion or something else?</p> <p>21 MR. CALLAN: You went through</p> <p>22 this whole thing. Asked and answered,</p> <p>23 objection.</p> <p>24 MR. SUCKLE: Then her answer</p> <p>25 should be the same.</p>	<p style="text-align: right;">Page 232</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. And the second form, did you</p> <p>3 review this at any time while Mr.</p> <p>4 Schoolcraft was in the hospital or were</p> <p>5 you done with Mr. Schoolcraft's care and</p> <p>6 treatment after that?</p> <p>7 A. I did not review that. I do</p> <p>8 not go to the inpatient. I was not in</p> <p>9 the inpatient.</p> <p>10 Q. So this form was completed in</p> <p>11 part by you in the emergency room, and</p> <p>12 the rest was completed for the inpatient</p> <p>13 by the second confirming physician?</p> <p>14 A. Yes.</p> <p>15 MR. SUCKLE: Mark this as</p> <p>16 Plaintiff's Exhibit 70.</p> <p>17 [The document was hereby marked</p> <p>18 as Plaintiff's Exhibit 70 for</p> <p>19 identification, as of this date.]</p> <p>20 Q. I show you what's been marked</p> <p>21 Exhibit 70 for today's date and ask you</p> <p>22 what that is?</p> <p>23 MR. RADOMISLI: Do you have one</p> <p>24 at least?</p> <p>25 MR. SUCKLE: You produced it.</p>
<p style="text-align: right;">Page 231</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. I give you the same answer.</p> <p>3 Q. What is the same answer?</p> <p>4 A. I made the decision and I asked</p> <p>5 for Dr. Dhar's opinion and Dr. Dhar</p> <p>6 agreed.</p> <p>7 Q. Was there anything about Mr.</p> <p>8 Schoolcraft's presentation to you that</p> <p>9 made you unsure of your opinion?</p> <p>10 MR. RADOMISLI: Objection to</p> <p>11 form; unsure.</p> <p>12 A. Once more I have to reiterate:</p> <p>13 I was not only looking at that day when I</p> <p>14 saw him, I was looking at the whole</p> <p>15 picture; the whole picture from the time</p> <p>16 that he came in to the time that I made</p> <p>17 the decision that he needs to be</p> <p>18 admitted.</p> <p>19 Q. Was there anything about that</p> <p>20 whole picture as you say and the opinion</p> <p>21 you formed as a result of that whole</p> <p>22 picture of which you were unsure; that is</p> <p>23 the question?</p> <p>24 A. That I was not, no. I made a</p> <p>25 decision so I had to admit him.</p>	<p style="text-align: right;">Page 233</p> <p>1 L. ALDANA-BERNIER</p> <p>2 MR. CALLAN: What you are</p> <p>3 showing is Emergency Admission Status.</p> <p>4 Q. Do you know what that is?</p> <p>5 MR. CALLAN: Do you have a copy</p> <p>6 machine?</p> <p>7 MR. SMITH: I do.</p> <p>8 MR. CALLAN: Before the end of</p> <p>9 day?</p> <p>10 MR. SMITH: For sure.</p> <p>11 MR. CALLAN: It's only three</p> <p>12 pages.</p> <p>13 MR. SMITH: Everybody take a</p> <p>14 break. I'll make copies right now.</p> <p>15 It's 4:34. We are taking a</p> <p>16 break.</p> <p>17 [Discussion held off the</p> <p>18 record.]</p> <p>19 [Whereupon, at 4:34 p.m., a</p> <p>20 recess was taken.]</p> <p>21 [Whereupon, at 4:49 p.m., the</p> <p>22 testimony continued.]</p> <p>23 [The documents were hereby</p> <p>24 marked as Plaintiff's Exhibits 71</p> <p>25 through 75 for identification, as of</p>

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<p style="text-align: right;">Page 234</p> <p>1 L. ALDANA-BERNIER 2 this date.] 3 Q. Doctor, you have in front of 4 you Exhibit 70 I believe. 5 A. Yeah. 6 Q. Do you know what that is? 7 A. Yes. 8 Q. What is it? 9 A. It's a policy on Emergency 10 Admission Status. 11 Q. Did you have any hand in 12 creating this document? 13 A. I do not remember. I just 14 probably would see it, but I don't 15 remember crafting it or making all of 16 those policies. 17 Q. I realize it's long and I know 18 you're tired, I appreciate that, but you 19 have to keep your voice up if you can. 20 When you were the director of 21 the emergency room, did you have a 22 supervisor that you answered to? 23 A. Yes. 24 Q. Who was that? 25 A. Dr. Dhar and Dr. Vivek.</p>	<p style="text-align: right;">Page 236</p> <p>1 L. ALDANA-BERNIER 2 will listen to what is being changed or 3 being added. 4 MR. CALLAN: Keep your voice up, 5 Doctor, louder. 6 Q. Doctor, I know that the last 7 review was April of 2010. Was anything 8 changed then? 9 A. I would not remember. 10 Q. It appears that the policy was 11 reviewed every April from 1999 through 12 2010. What does the review entail, do 13 you know? 14 A. Going back to all of this if 15 there is anything added that the 16 Department of Health would like to add. 17 Q. What is on here, what is the 18 information on here, how would you 19 characterize that? 20 A. Well, it's giving us all the 21 reasons about when we admit the patient. 22 It's the 9.39. 23 Q. Do you know the vernacular, 24 CPEP, do you know what a CPEP is? 25 A. Community --</p>
<p style="text-align: right;">Page 235</p> <p>1 L. ALDANA-BERNIER 2 Q. So the chairman and the 3 associate chairman? 4 A. Yes. 5 Q. Did they have a hand in 6 creating this form? 7 A. Yes. 8 Q. So who else was involved in the 9 creation of this form? You said you sat 10 in maybe? 11 A. Yes. It's all the 12 administrative leaders of the department: 13 the unit chief, Dr. Dhar, Dr. Vivek, and 14 the director of the nursing department. 15 Q. Have you ever from time to time 16 had to reference this document for your 17 own information? 18 MR. RADOMISLI: Objection to 19 form. 20 A. You mean go back and read? 21 Q. Yes, that's another way of 22 asking it. 23 A. I see it every now and then if 24 we have administrative meetings, we have 25 to see it once again so I more or less</p>	<p style="text-align: right;">Page 237</p> <p>1 L. ALDANA-BERNIER 2 Q. Community psyche emergency 3 protocol? 4 A. Where are you? 5 Q. It's not on here. 6 Do you know that vernacular, do 7 you know what that stands for, CPEP? 8 MR. RADOMISLI: Did you say what 9 you thought it stood for on the 10 record? I don't think you got it 11 right. 12 Q. Do you know what CPEP stands 13 for? 14 A. Referring to CPEP? 15 Q. What is that? 16 A. That is the holding a patient 17 in that department instead of sending the 18 patient to admission. 19 Q. Holding them in that -- 20 A. It's a different department of 21 ER wherein you can hold a patient before 22 you could admit the patient to the 23 inpatient. 24 Q. That's the psych ER, the 25 medical ER, or both?</p>

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<p style="text-align: right;">Page 238</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. The psych ER.</p> <p>3 Q. And that wasn't done with Mr.</p> <p>4 Schoolcraft, correct?</p> <p>5 A. Because we did not have a CPEP</p> <p>6 then.</p> <p>7 Q. What does that stand for?</p> <p>8 A. Community psychiatry emergency</p> <p>9 -- I do not have the whole name, sorry.</p> <p>10 Q. But Jamaica Hospital has one</p> <p>11 now?</p> <p>12 A. It has one, yes.</p> <p>13 Q. When looking at Exhibit 70, is</p> <p>14 it your understanding this sets out what</p> <p>15 is required under 9.39 of the mental</p> <p>16 health law to admit someone under the</p> <p>17 mental health law?</p> <p>18 MR. CALLAN: Objection to form.</p> <p>19 MR. LEE: Objection to the form.</p> <p>20 A. I want you to rephrase that</p> <p>21 one.</p> <p>22 Q. Sure.</p> <p>23 What is the standard set out in</p> <p>24 this document, if you know?</p> <p>25 MR. CALLAN: Do you want her to</p>	<p style="text-align: right;">Page 240</p> <p>1 L. ALDANA-BERNIER</p> <p>2 policies of Jamaica Hospital, the written</p> <p>3 ones?</p> <p>4 A. The written, yes.</p> <p>5 Q. In dealing with Mr.</p> <p>6 Schoolcraft, did you endeavor to follow</p> <p>7 the policy set forth here as Exhibit 70?</p> <p>8 MR. CALLAN: Well, this says it</p> <p>9 was revised 4/10.</p> <p>10 MR. SUCKLE: I asked her if she</p> <p>11 knew what --</p> <p>12 MR. CALLAN: Well, we don't</p> <p>13 know.</p> <p>14 MR. SUCKLE: It doesn't say</p> <p>15 revised. It says reviewed. Please</p> <p>16 don't speak. I asked her about --</p> <p>17 MR. CALLAN: Are you making a</p> <p>18 representation this was the policy</p> <p>19 that was in effect at the time that</p> <p>20 Mr. Schoolcraft were seen?</p> <p>21 MR. SUCKLE: I'm asking if she</p> <p>22 followed this policy, endeavored to</p> <p>23 follow this policy, whether it was in</p> <p>24 effect or not she can tell me.</p> <p>25 MR. LEE: Objection to form.</p>
<p style="text-align: right;">Page 239</p> <p>1 L. ALDANA-BERNIER</p> <p>2 read the document, a summary?</p> <p>3 MR. SUCKLE: I want to know her</p> <p>4 understanding of it.</p> <p>5 MR. CALLAN: I object. It's a</p> <p>6 three-page piece of paper. It speaks</p> <p>7 for itself.</p> <p>8 Objection to the form of the</p> <p>9 question.</p> <p>10 Q. Do you know what this is?</p> <p>11 A. Yes, it's a New York Mental</p> <p>12 Hygiene Law, that's careful attention</p> <p>13 with preservation of their legal rights</p> <p>14 as well as their safety.</p> <p>15 Q. Is this the policy of Jamaica</p> <p>16 Hospital?</p> <p>17 A. To do a 9.39?</p> <p>18 Q. Is this document a policy of</p> <p>19 Jamaica Hospital?</p> <p>20 A. It's showing in here Jamaica</p> <p>21 Hospital Department of Psychiatry Manual.</p> <p>22 Q. Is it a policy of Jamaica</p> <p>23 Hospital, a written policy?</p> <p>24 A. A written policy, yes.</p> <p>25 Q. Do you endeavor to follow the</p>	<p style="text-align: right;">Page 241</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. It's saying in here, "Patient</p> <p>3 alleged to have a mental illness for</p> <p>4 which immediate observation, care, and</p> <p>5 treatment in a hospital is appropriate</p> <p>6 and which is likely to result in serious</p> <p>7 harm to himself or others may be admitted</p> <p>8 under this provision for a period of 15</p> <p>9 days."</p> <p>10 Q. The question is: Did you</p> <p>11 endeavor to follow this policy in your</p> <p>12 care and treatment of Mr. Schoolcraft?</p> <p>13 A. At that point in 2009, I</p> <p>14 thought -- I believe that he may be a</p> <p>15 danger to others or to himself because of</p> <p>16 that point in time if you go back to the</p> <p>17 story where he was brought to the</p> <p>18 hospital because he was acting bizarre</p> <p>19 and agitated and he was paranoid. I</p> <p>20 think he was a danger to others or to</p> <p>21 himself.</p> <p>22 Q. Is your answer, yes, you tried</p> <p>23 to --</p> <p>24 A. That's what I'm saying, yes.</p> <p>25 Q. Under this policy, under number</p>

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<p style="text-align: right;">Page 242</p> <p>1 L. ALDANA-BERNIER</p> <p>2 1 is "a substantial risk of physical harm</p> <p>3 to himself as manifested by threats of or</p> <p>4 attempts at suicide."</p> <p>5 Did he manifest threats or</p> <p>6 attempts at suicide?</p> <p>7 MR. SHAFFER: Objection.</p> <p>8 MR. CALLAN: Objection.</p> <p>9 Q. Did Mr. Schoolcraft manifest</p> <p>10 threats or attempts at suicide?</p> <p>11 A. You have to finish.</p> <p>12 Q. We are going to break it down.</p> <p>13 We are going to go one by one?</p> <p>14 MR. CALLAN: Objection.</p> <p>15 MR. SUCKLE: That's the</p> <p>16 question.</p> <p>17 MR. CALLAN: Objection to the</p> <p>18 form of the question.</p> <p>19 MR. SUCKLE: Noted. She can</p> <p>20 answer.</p> <p>21 MR. CALLAN: The doctor said you</p> <p>22 left something out. You are reading</p> <p>23 incomplete sentences from a three-page</p> <p>24 document.</p> <p>25 MR. SUCKLE: I'm asking</p>	<p style="text-align: right;">Page 244</p> <p>1 L. ALDANA-BERNIER</p> <p>2 himself as manifested by a threat of or</p> <p>3 attempt at suicide?</p> <p>4 MR. CALLAN: Objection, asked</p> <p>5 and answered.</p> <p>6 MR. SUCKLE: Not answered yet.</p> <p>7 Q. Yes or no?</p> <p>8 MR. CALLAN: Objection, asked</p> <p>9 and answered.</p> <p>10 Q. Can you answer, please?</p> <p>11 A. A potential risk, yes.</p> <p>12 Q. So you say he manifest by a</p> <p>13 threat or attempt at suicide; it that</p> <p>14 what you're saying?</p> <p>15 A. A potential risk.</p> <p>16 Q. Did he manifest by a threat of</p> <p>17 suicide?</p> <p>18 A. It's the behavior that he came</p> <p>19 in with to the emergency room. I saw he</p> <p>20 was a potential risk that he might hurt</p> <p>21 himself or hurt others. That's a</p> <p>22 potential risk.</p> <p>23 Q. So potential risk was the</p> <p>24 reason that you held him, correct?</p> <p>25 A. That's the reason that I was</p>
<p style="text-align: right;">Page 243</p> <p>1 L. ALDANA-BERNIER</p> <p>2 questions. In my horrific stumbling</p> <p>3 way, I'm asking a question.</p> <p>4 Q. Doctor, did you admit Mr.</p> <p>5 Schoolcraft because he was a substantial</p> <p>6 risk of physical harm to himself as</p> <p>7 manifested by a threat or attempt at</p> <p>8 suicide?</p> <p>9 A. Sir --</p> <p>10 Q. Just yes or no.</p> <p>11 A. Sir, you have to complete the</p> <p>12 statement.</p> <p>13 Q. I don't have to do anything.</p> <p>14 You have to answer questions.</p> <p>15 MR. SHAFFER: Objection.</p> <p>16 A. "Or other conduct demonstrating</p> <p>17 he is a danger to himself."</p> <p>18 Q. We're going to get there. I</p> <p>19 know that part. I'm asking you a</p> <p>20 question.</p> <p>21 A. That's what I based --</p> <p>22 Q. We are going to get to what you</p> <p>23 based your opinion on. I'm asking you:</p> <p>24 Did you base it on that he was a</p> <p>25 substantial risk of physical harm to</p>	<p style="text-align: right;">Page 245</p> <p>1 L. ALDANA-BERNIER</p> <p>2 thinking that he needs admission.</p> <p>3 Q. And the potential of that risk</p> <p>4 you've described to us already today?</p> <p>5 A. I did, yes.</p> <p>6 Q. And this potential of a risk,</p> <p>7 did the doctor who saw him within the</p> <p>8 48-hour period to confirm his admission</p> <p>9 also tell you that he was concerned about</p> <p>10 the potential risk?</p> <p>11 MR. RADOMISLI: Objection.</p> <p>12 MR. LEE: Objection to the form.</p> <p>13 MR. CALLAN: I join in the</p> <p>14 objection.</p> <p>15 Q. Did he tell you he was</p> <p>16 concerned about the potential risk that</p> <p>17 you've just described?</p> <p>18 MR. LEE: There's been no</p> <p>19 testimony she ever talked to him.</p> <p>20 MR. SUCKLE: She can say that if</p> <p>21 that's the answer.</p> <p>22 A. If you read the notes, I wasn't</p> <p>23 there for him to tell me that. As I read</p> <p>24 his notes, I can see he was a potential</p> <p>25 risk.</p>

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<p style="text-align: right;">Page 246</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. This potential risk that you're</p> <p>3 talking about, did he have this potential</p> <p>4 risk when you last saw him?</p> <p>5 A. I'm not basing it only to one</p> <p>6 day. I'm basing it from the beginning</p> <p>7 that he came into the hospital.</p> <p>8 Q. And this potential risk, is</p> <p>9 there any other risk besides that</p> <p>10 potential risk that you just described as</p> <p>11 the reason that you held him?</p> <p>12 A. What risk are you thinking of?</p> <p>13 Q. I'm not thinking of any.</p> <p>14 MR. CALLAN: Do you want her to</p> <p>15 repeat herself again?</p> <p>16 MR. SUCKLE: No, I want to make</p> <p>17 sure there are no other ones.</p> <p>18 Q. Is that potential risk that you</p> <p>19 just described the only reason that you</p> <p>20 held him?</p> <p>21 A. The same reason I think when I</p> <p>22 see a patient, it is a potential risk and</p> <p>23 danger to others, and I make the decision</p> <p>24 I have to admit the patient.</p> <p>25 Q. And when you say "potential</p>	<p style="text-align: right;">Page 248</p> <p>1 L. ALDANA-BERNIER</p> <p>2 do you mean?</p> <p>3 Q. Sure.</p> <p>4 Well, you used the word</p> <p>5 "potential." I would like to know what</p> <p>6 you mean by potential.</p> <p>7 A. If you think of the navy yard</p> <p>8 disaster, was he an officer or army man?</p> <p>9 He was so quite, no one ever found out</p> <p>10 what was going on with him. So what</p> <p>11 happened then?</p> <p>12 Or if you look at all of those</p> <p>13 -- the Range Rover. Who are all of these</p> <p>14 people that caused that? They are all</p> <p>15 police officers.</p> <p>16 So if I think then I have to</p> <p>17 make sure that when I see a patient in</p> <p>18 the ER, I have to think in the future</p> <p>19 that there will be no disaster, there</p> <p>20 will be no destruction, or no one will</p> <p>21 get harmed when they were discharged from</p> <p>22 the ER.</p> <p>23 Q. I was asking about what you</p> <p>24 meant by potential.</p> <p>25 A. That's the potential.</p>
<p style="text-align: right;">Page 247</p> <p>1 L. ALDANA-BERNIER</p> <p>2 risk," can you quantify that for me at</p> <p>3 all what you mean by potential?</p> <p>4 A. The patient comes in barricaded</p> <p>5 himself, acting bizarre. He was brought</p> <p>6 in from his house. It was a police</p> <p>7 officer who may have access to weapons,</p> <p>8 easy for him to have access to weapons.</p> <p>9 He is paranoid. I would think that maybe</p> <p>10 it would be safe if the patient will be</p> <p>11 admitted.</p> <p>12 Q. So your thought he might be</p> <p>13 safe if he was admitted?</p> <p>14 A. If he was admitted.</p> <p>15 Q. That's what you were talking</p> <p>16 about when you say potential risk,</p> <p>17 correct?</p> <p>18 A. All of the above that I told</p> <p>19 you.</p> <p>20 Q. Can you quantify what you mean</p> <p>21 by potential risk as far as the</p> <p>22 likelihood of risk? This word</p> <p>23 "potential" that you have been using, can</p> <p>24 you quantify that for me?</p> <p>25 A. When you say "quantify," what</p>	<p style="text-align: right;">Page 249</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. So if there is any potential at</p> <p>3 all, you want to make sure that the</p> <p>4 patient is safe, correct?</p> <p>5 A. Correct.</p> <p>6 Q. And if there is any potential</p> <p>7 at all, you want to make sure the</p> <p>8 community is safe, correct?</p> <p>9 A. That's correct.</p> <p>10 Q. And if there is any potential</p> <p>11 at all, you were going to admit Mr.</p> <p>12 Schoolcraft, correct?</p> <p>13 MR. LEE: Objection to form.</p> <p>14 A. With all of those reasons, yes,</p> <p>15 I would have to admit him.</p> <p>16 Q. When you admitted him to the</p> <p>17 emergency room, there were certain rules</p> <p>18 and regulations --</p> <p>19 MR. SUCKLE: Withdrawn.</p> <p>20 Q. When he was admitted to the</p> <p>21 psych floor, there were certain rules and</p> <p>22 regulations in the psych ward, correct,</p> <p>23 about clothes they wear, what hours</p> <p>24 visitors can come, correct?</p> <p>25 A. Yes.</p>

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<p style="text-align: right;">Page 250</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. It's not like they are free to</p> <p>3 have anybody come and visit any time they</p> <p>4 want, correct; is that true?</p> <p>5 A. That's correct.</p> <p>6 Q. I will show you what's been</p> <p>7 marked as Exhibit 71.</p> <p>8 Now, do you know what that is?</p> <p>9 A. [No response.]</p> <p>10 Q. Do you know what that is?</p> <p>11 A. It's the policy of visiting</p> <p>12 hours.</p> <p>13 Q. Were those the policies in</p> <p>14 effect when Mr. Schoolcraft was on the</p> <p>15 psychiatric floor at Jamaica Hospital in</p> <p>16 2009?</p> <p>17 A. Okay, this policy is for the</p> <p>18 inpatient unit.</p> <p>19 Q. During the time that Mr.</p> <p>20 Schoolcraft was at Jamaica Hospital, was</p> <p>21 he in the inpatient unit?</p> <p>22 A. I did not work in the inpatient</p> <p>23 unit.</p> <p>24 Q. I understand.</p> <p>25 Was he in the inpatient unit?</p>	<p style="text-align: right;">Page 252</p> <p>1 L. ALDANA-BERNIER</p> <p>2 when she drove by.</p> <p>3 MR. SUCKLE: I'll ask her about</p> <p>4 it next.</p> <p>5 MR. SHAFFER: I will be leaving</p> <p>6 if that is a question that's asked.</p> <p>7 A. Can you ask the question again?</p> <p>8 Q. What were the visiting hours on</p> <p>9 the floor?</p> <p>10 A. Two to three, 6:30 to eight.</p> <p>11 Q. So Mr. Schoolcraft if his</p> <p>12 father wanted to visit him at nine</p> <p>13 o'clock in the morning, would not be able</p> <p>14 to do that, correct?</p> <p>15 MR. CALLAN: Objection.</p> <p>16 MR. RADOMISLI: Objection.</p> <p>17 MR. LEE: Objection to form.</p> <p>18 A. I would not know what the</p> <p>19 policy at the inpatient unit would be.</p> <p>20 MR. SUCKLE: Counsel wants me to</p> <p>21 ask about painting, but I'm not going</p> <p>22 to do that.</p> <p>23 MR. CALLAN: That's a relief.</p> <p>24 Q. Let's look at Exhibit 72.</p> <p>25 MR. SMITH: Which is --</p>
<p style="text-align: right;">Page 251</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. Yeah, he was in the inpatient</p> <p>3 unit.</p> <p>4 Q. Were these documents created by</p> <p>5 Jamaica Hospital, the visiting hours, do</p> <p>6 you know about that?</p> <p>7 A. It's in here [indicating].</p> <p>8 Q. Were you sitting in on the</p> <p>9 committee that created that document too?</p> <p>10 A. I don't remember that.</p> <p>11 Q. Do you agree that Mr.</p> <p>12 Schoolcraft could have visitors from 2</p> <p>13 p.m. and 3 p.m. and 6:30 p.m. to 8 p.m.</p> <p>14 only?</p> <p>15 MR. RADOMISLI: Objection.</p> <p>16 MR. CALLAN: Objection.</p> <p>17 Q. While he was on the floor, do</p> <p>18 you agree with that?</p> <p>19 MR. CALLAN: You know, Counsel,</p> <p>20 she said she is not involved with the</p> <p>21 inpatient.</p> <p>22 Maybe you can ask her about</p> <p>23 painting the hospital. Maybe she</p> <p>24 might know something about that.</p> <p>25 Maybe she looked at it from her car</p>	<p style="text-align: right;">Page 253</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Which is the restriction of</p> <p>3 visiting and communication and</p> <p>4 correspondence, do you know about that,</p> <p>5 what that document is?</p> <p>6 A. This is also for the inpatient</p> <p>7 unit.</p> <p>8 Q. So you don't know anything</p> <p>9 about it?</p> <p>10 A. I can read it to you.</p> <p>11 Q. Do you know anything about it?</p> <p>12 A. No, it's for the inpatient</p> <p>13 unit.</p> <p>14 Q. So you only know about the</p> <p>15 emergency room?</p> <p>16 A. Emergency room.</p> <p>17 MR. CALLAN: Aren't you doing</p> <p>18 Isakov tomorrow? Isn't he in the</p> <p>19 inpatient room?</p> <p>20 Q. I'm showing you what's been</p> <p>21 marked Exhibit 74 today's date. Do you</p> <p>22 know what this is?</p> <p>23 A. It's the rules and regulations</p> <p>24 the patients have to comply with.</p> <p>25 Q. At Jamaica Hospital in the</p>

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<p style="text-align: right;">Page 254</p> <p>1 L. ALDANA-BERNIER 2 psych unit? 3 A. Psych Unit 3, yes. 4 Q. What is Psych Unit 3? 5 A. That's -- it's a unit which 6 patients are admitted; one is 2 and one 7 is 3. 8 Q. What is the distinction, if 9 any, in treatment? 10 A. None, it's the same. 11 Q. Was Mr. Schoolcraft admitted to 12 Psych 3? 13 A. Yes. 14 Q. So these rules would apply to 15 him? 16 A. Psych 3. 17 MR. RADOMISLI: Mr. Suckle, is 18 this something we produced to you? 19 MR. SUCKLE: I believe so. I 20 don't know. 21 MR. RADOMISLI: Do you know? 22 MR. SUCKLE: Off the top of my 23 head, I don't remember but -- I don't 24 remember. 25 MR. RADOMISLI: Would there be a</p>	<p style="text-align: right;">Page 256</p> <p>1 L. ALDANA-BERNIER 2 was created by Jamaica Hospital, do 3 you have personal knowledge of that? 4 THE WITNESS: It says Unit 3 5 so.... 6 MR. CALLAN: I'm not asking you 7 what it says. 8 Do you have personal knowledge 9 as to whether that document was 10 created by Jamaica Hospital? 11 If you do, you can say yes, if 12 no, say no. Don't assume is all I'm 13 saying to you. 14 Do you know? 15 MR. SUCKLE: Stop badgering your 16 own witness. 17 THE WITNESS: I was just looking 18 at the top of it. 19 Q. Do you recognize this document? 20 A. Which one? 21 Q. This one, have you seen it 22 before? 23 A. I have to -- I don't think so 24 because it's inpatient unit. 25 MR. SMITH: You don't think so?</p>
<p style="text-align: right;">Page 255</p> <p>1 L. ALDANA-BERNIER 2 way for you to get it in a fashion 3 other than if we produced it? 4 MR. SUCKLE: I didn't do 5 discovery in this case so you've got 6 the wrong guy. 7 MR. RADOMISLI: Do you know 8 whether this was produced to you by 9 us? 10 MR. SUCKLE: Off the top of my 11 head, I would assume it was. In fact, 12 I know it came out of, I hit print on 13 your document response to discovery 14 inspection and this came out. I can 15 tell you that. 16 MR. RADOMISLI: Fair enough. 17 Thank you. 18 MR. CALLAN: Or it could be 19 another hospital in Queens, who knows. 20 Q. This document was created by 21 Jamaica Hospital, correct? 22 MR. CALLAN: Objection. 23 A. Correct. 24 Q. She already said yes. 25 MR. CALLAN: Do you know if that</p>	<p style="text-align: right;">Page 257</p> <p>1 L. ALDANA-BERNIER 2 THE WITNESS: It's in the 3 inpatient unit. I work in the ER. 4 Q. You work in the ER; am I 5 correct? 6 A. Yes. 7 Q. You have been doing this for 8 how many years, how long have you been 9 working in the ER? 10 A. Eighteen years. 11 Q. For 18 years people come into 12 the psychiatric ER, right, you evaluate 13 them, correct? 14 A. Yes. 15 Q. And you sign them in under 16 Mental Hygiene Law, they go upstairs, 17 correct? 18 A. Yes. 19 Q. And you never see them again; 20 is that true? 21 MR. CALLAN: Objection. 22 Q. While they were at the 23 hospital? 24 MR. CALLAN: Does that have to 25 do with the piece of paper?</p>

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<p style="text-align: right;">Page 258</p> <p>1 L. ALDANA-BERNIER</p> <p>2 MR. SUCKLE: I'm asking</p> <p>3 questions about the paper because you</p> <p>4 didn't like the paper.</p> <p>5 Q. Is that true? When they go</p> <p>6 upstairs on the psychiatric ward, you</p> <p>7 don't see them again, correct?</p> <p>8 A. That depends if you follow the</p> <p>9 patient on the outside, then you see them</p> <p>10 again.</p> <p>11 Q. When you say "follow the</p> <p>12 patient on the outside," do you follow</p> <p>13 patients on the outside?</p> <p>14 A. If they refer them to me, yes.</p> <p>15 Q. Who is they?</p> <p>16 A. The inpatient Unit 3.</p> <p>17 Q. So inpatient can refer a</p> <p>18 patient to you for private care?</p> <p>19 A. Yes.</p> <p>20 Q. Do you do your own private</p> <p>21 practice?</p> <p>22 A. Yes.</p> <p>23 Q. Do you have an office outside</p> <p>24 of Jamaica Hospital?</p> <p>25 A. I do.</p>	<p style="text-align: right;">Page 260</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. So five o'clock on Fridays you</p> <p>3 see private patients in your own</p> <p>4 practice; is that what you're saying?</p> <p>5 A. Yes.</p> <p>6 Q. How many hours do you usually</p> <p>7 do that?</p> <p>8 A. Four hours.</p> <p>9 Q. Could you get referrals from</p> <p>10 time to time from patients up on the</p> <p>11 psych 3 unit?</p> <p>12 A. Yes.</p> <p>13 Q. Who refers them to you: the</p> <p>14 physicians up there, the nurses, anybody</p> <p>15 else?</p> <p>16 A. Social worker.</p> <p>17 Q. Social workers?</p> <p>18 A. Yes.</p> <p>19 MR. CALLAN: Counsel, does this</p> <p>20 have anything remotely to do with Mr.</p> <p>21 Schoolcraft?</p> <p>22 MR. SUCKLE: I don't know yet.</p> <p>23 MR. CALLAN: Has he told you he</p> <p>24 was seeing Dr. Aldana-Bernier in her</p> <p>25 office?</p>
<p style="text-align: right;">Page 259</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. In this private practice, you</p> <p>3 practice psychiatry I assume, correct?</p> <p>4 A. What else would I practice?</p> <p>5 Q. I don't know. I'm just making</p> <p>6 sure.</p> <p>7 How many days a week do you</p> <p>8 work in that private practice?</p> <p>9 A. One.</p> <p>10 Q. How many days a week did you</p> <p>11 work at Jamaica Hospital in 2009?</p> <p>12 A. Five.</p> <p>13 Q. And you also had private</p> <p>14 practice back in 2009?</p> <p>15 A. That's -- yes, one, one day.</p> <p>16 Q. So just to be clear: You were</p> <p>17 working six days a week back in 2009,</p> <p>18 correct, five at Jamaica, one on your</p> <p>19 own?</p> <p>20 A. I work with somebody.</p> <p>21 Q. So you are working six days a</p> <p>22 week, five at Jamaica Hospital and one in</p> <p>23 private practice in 2009?</p> <p>24 A. Five days a week after I come</p> <p>25 -- after five o'clock on Friday.</p>	<p style="text-align: right;">Page 261</p> <p>1 L. ALDANA-BERNIER</p> <p>2 MR. SUCKLE: Are you saying her</p> <p>3 resumé is not part of my questions?</p> <p>4 MR. CALLAN: I'm just asking.</p> <p>5 You have been going for hours here and</p> <p>6 now we have gone down this road to</p> <p>7 nowhere. I would kind of like to get</p> <p>8 it back.</p> <p>9 This all has to do with you</p> <p>10 handing her a piece of paper if they</p> <p>11 can smoke in the inpatient unit or not</p> <p>12 which I will be willing to stipulate</p> <p>13 by the way that no smoking is allowed.</p> <p>14 I think it is Rule No. 1</p> <p>15 assuming that's Psych Unit 3 is</p> <p>16 Jamaica Hospital.</p> <p>17 MR. SUCKLE: Are you enjoying</p> <p>18 extending our stay here?</p> <p>19 Q. So did you see Mr. Schoolcraft</p> <p>20 in your private practice?</p> <p>21 A. No.</p> <p>22 Q. Did you see police officers in</p> <p>23 your private practice?</p> <p>24 A. No.</p> <p>25 Q. Did a Captain Lauterborn tell</p>

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<p style="text-align: right;">Page 262</p> <p>1 L. ALDANA-BERNIER 2 you that from his observation of Mr. 3 Schoolcraft as he observed Mr. 4 Schoolcraft on October 31st, 2009, that 5 Mr. Schoolcraft was fit for duty? 6 MR. SHAFFER: Objection. 7 Q. Did he tell you that? 8 A. I did not meet him. 9 Q. So am I correct that you got 10 the history of Mr. Schoolcraft 11 barricading him [sic] from some police 12 officers, but you didn't get the 13 histories from other police officers like 14 Captain Lauterborn; am I correct? 15 MR. CALLAN: Objection to form. 16 MR. LEE: Objection to form. 17 MR. RADOMISLI: Objection to 18 form. 19 A. I don't know the officer. I 20 haven't met him. 21 Q. Well, it was Mr. Schoolcraft's 22 captain. Are you aware that Captain 23 Lauterborn was his captain? 24 MR. SHAFFER: Objection. 25 A. No.</p>	<p style="text-align: right;">Page 264</p> <p>1 L. ALDANA-BERNIER 2 officer at the time when I saw Mr. 3 Schoolcraft. 4 MR. CALLAN: Doctor, he didn't 5 say he came to the hospital. I know 6 it's getting late in the day. He is 7 asking you to make an assumption about 8 something. He asking you a question. 9 He didn't say this person came to the 10 hospital so just listen carefully to 11 the question. 12 Go ahead, Counsel. 13 MR. SUCKLE: Read that back. 14 [The requested portion of the 15 record was read.] 16 Q. My question is: Would you have 17 liked to know, would it have helped you 18 in your assessment of Mr. Schoolcraft 19 that his captain said he was fit for duty 20 on October 31st, 2009? 21 MR. KRETZ: Objection. 22 MR. CALLAN: On October 31st? 23 MR. SUCKLE: Yes. 24 MR. CALLAN: Objection. 25 A. Yes, I would.</p>
<p style="text-align: right;">Page 263</p> <p>1 L. ALDANA-BERNIER 2 Q. So you were not aware when you 3 signed the form on November 3rd, to admit 4 Mr. Schoolcraft to the hospital that his 5 captain said that he was fit for duty? 6 MR. CALLAN: Objection. 7 MR. SHAFFER: Objection. 8 MR. RADOMISLI: Objection. 9 Q. You did not know that? 10 MR. SHAFFER: Objection. 11 A. No, I didn't know that. 12 Q. Would you like to have known 13 that information, would it have helped 14 you in your assessment of Mr. 15 Schoolcraft? 16 MR. SHAFFER: Objection. 17 MR. CALLAN: I join in the 18 objection. 19 Q. Would you have liked to know, 20 would that have helped you in your 21 assessment of Mr. Schoolcraft? 22 MR. CALLAN: If it's true. 23 A. I didn't even know when he came 24 to the hospital, I didn't see any 25 officer. I don't remember if I seen an</p>	<p style="text-align: right;">Page 265</p> <p>1 L. ALDANA-BERNIER 2 Q. Would that have changed your 3 opinion regarding whether or not Mr. 4 Schoolcraft needed to be admitted to the 5 hospital if you had known that Captain 6 Lauterborn had said that Mr. Schoolcraft 7 was fit for duty on October 31st, 2009? 8 MR. RADOMISLI: Can you just 9 define when he said that? 10 MR. SUCKLE: On that day, 11 October 31st, 2009. 12 MR. RADOMISLI: Before Mr. 13 Schoolcraft left? 14 MR. SUCKLE: I just want to ask 15 the question. You can narrow it down 16 anyway you want when your turn comes. 17 Let's have a question and an 18 answer. 19 MR. RADOMISLI: I would like a 20 time frame. 21 MR. SUCKLE: I know what you 22 want. I asked a question. 23 MR. RADOMISLI: Objection to 24 form. 25 MR. SHAFFER: I join in the</p>

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<p style="text-align: right;">Page 266</p> <p>1 L. ALDANA-BERNIER</p> <p>2 objection.</p> <p>3 Q. Would you have changed your</p> <p>4 opinion had you known on October 31st,</p> <p>5 2009, at 21:30 hours, Captain Lauterborn</p> <p>6 said that Mr. Schoolcraft was fit for</p> <p>7 duty, would that have changed your</p> <p>8 opinion?</p> <p>9 MR. KRETZ: Objection.</p> <p>10 MR. CALLAN: Objection.</p> <p>11 MR. SHAFFER: Objection.</p> <p>12 Q. Would you have admitted him is</p> <p>13 the question?</p> <p>14 A. Yes, I would have admitted him.</p> <p>15 Q. How would it have changed your</p> <p>16 opinion. You said it would change your</p> <p>17 opinion?</p> <p>18 MR. CALLAN: You asked if she</p> <p>19 would have liked to have known.</p> <p>20 MR. SUCKLE: I did ask her.</p> <p>21 Q. Would it change your opinion if</p> <p>22 you knew that Captain Lauterborn on</p> <p>23 October 31st, 2009, at 21:30 hours,</p> <p>24 deemed Mr. Schoolcraft fit for duty?</p> <p>25 A. It would not change my opinion.</p>	<p style="text-align: right;">Page 268</p> <p>1 L. ALDANA-BERNIER</p> <p>2 MR. SHAFFER: Objection.</p> <p>3 A. I get it from the information</p> <p>4 in the report.</p> <p>5 Q. Did you speak to any police</p> <p>6 officer to verify he was acting bizarre?</p> <p>7 MR. SHAFFER: Objection.</p> <p>8 MR. CALLAN: Asked and answered.</p> <p>9 Q. Did you speak to any officers?</p> <p>10 A. It's been reported and written</p> <p>11 down in the document.</p> <p>12 MR. KRETZ: Read that back.</p> <p>13 [The requested portion of the</p> <p>14 record was read.]</p> <p>15 Q. Seroquel, do you know what that</p> <p>16 is?</p> <p>17 A. Yes.</p> <p>18 Q. What is it?</p> <p>19 A. A second generation</p> <p>20 antipsychotic.</p> <p>21 Q. Is that also used for sleep</p> <p>22 disorders?</p> <p>23 A. Sleep, depression, bipolar,</p> <p>24 used for psychosis.</p> <p>25 MR. SMITH: We are going to take</p>
<p style="text-align: right;">Page 267</p> <p>1 L. ALDANA-BERNIER</p> <p>2 I would talk to maybe the captain, and I</p> <p>3 will tell him what is going on, and I</p> <p>4 will make a decision together again with</p> <p>5 the chairman if he should be admitted or</p> <p>6 discharged.</p> <p>7 Q. And you would talk to the</p> <p>8 captain because you want to verify that</p> <p>9 information, correct?</p> <p>10 MR. KRETZ: Objection.</p> <p>11 MR. CALLAN: Same objection.</p> <p>12 Q. Is that why you would have</p> <p>13 talked to the captain?</p> <p>14 MR. CALLAN: Verify what</p> <p>15 information, what information,</p> <p>16 Counsel?</p> <p>17 MR. SUCKLE: She said she would</p> <p>18 talk to the captain.</p> <p>19 Q. Why would you have talked to</p> <p>20 the captain?</p> <p>21 A. To verify that he said he was</p> <p>22 fit for duty.</p> <p>23 Q. Did you speak to any officers</p> <p>24 to verify that he had barricaded himself</p> <p>25 in his house?</p>	<p style="text-align: right;">Page 269</p> <p>1 L. ALDANA-BERNIER</p> <p>2 a short break to see what we have</p> <p>3 left.</p> <p>4 It's 5:24. We are going off the</p> <p>5 record.</p> <p>6 MR. CALLAN: All right.</p> <p>7 [Discussion held off the</p> <p>8 record.]</p> <p>9 [Whereupon, at 5:24 p.m., a</p> <p>10 recess was taken.]</p> <p>11 [Whereupon, at 5:38 p.m., the</p> <p>12 testimony continued.]</p> <p>13 MR. SMITH: Back on the record.</p> <p>14 It is 5:38 p.m.</p> <p>15 MR. RADOMISLI: Just before you</p> <p>16 start asking questions, I sent an</p> <p>17 email to my associate at the office</p> <p>18 asking him to do a search in our</p> <p>19 system to determine if we ever</p> <p>20 provided with you document Psych 3</p> <p>21 Unit Rules, according to his search,</p> <p>22 there is nothing on our system</p> <p>23 indicating we ever did.</p> <p>24 I ask you send us by within a</p> <p>25 week an explanation how you obtained</p>

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<p style="text-align: right;">Page 270</p> <p>1 L. ALDANA-BERNIER</p> <p>2 this document. I'm not saying we</p> <p>3 didn't give it to you, all I'm saying</p> <p>4 is according to my associate based on</p> <p>5 his search, there is no indication we</p> <p>6 did.</p> <p>7 MR. SUCKLE: I will double-check</p> <p>8 my records, but I'm fairly confident</p> <p>9 that it came from you.</p> <p>10 MR. CALLAN: It didn't come from</p> <p>11 me. I can tell you that.</p> <p>12 MR. SUCKLE: Maybe the house</p> <p>13 painter gave it.</p> <p>14 Q. Doctor, I know it's late. We</p> <p>15 are getting there.</p> <p>16 Doctor, in your position as</p> <p>17 employee of the hospital, do you get a</p> <p>18 performance evaluation, do you get</p> <p>19 evaluated in your performance?</p> <p>20 A. Yes.</p> <p>21 Q. Is that something done</p> <p>22 annually, some other way?</p> <p>23 A. Annually.</p> <p>24 Q. Are they written evaluations?</p> <p>25 A. Are they written, yes.</p>	<p style="text-align: right;">Page 272</p> <p>1 L. ALDANA-BERNIER</p> <p>2 answer that question.</p> <p>3 Q. When you talk about</p> <p>4 performance, is there any relationship</p> <p>5 between performance and the number of</p> <p>6 patients seen in your evaluation?</p> <p>7 MR. CALLAN: Objection to the</p> <p>8 question.</p> <p>9 MR. SUCKLE: Just generally not</p> <p>10 only her.</p> <p>11 Q. Generally, is part of your</p> <p>12 performance evaluation based on the</p> <p>13 number of patients seen?</p> <p>14 MR. RADOMISLI: Objection based</p> <p>15 on privilege, but I can't direct her</p> <p>16 not to answer.</p> <p>17 MR. SUCKLE: I don't think</p> <p>18 that's privileged. She just gave me</p> <p>19 generally categories of evaluations.</p> <p>20 MR. RADOMISLI: You're asking</p> <p>21 her?</p> <p>22 MR. SUCKLE: I'm asking</p> <p>23 generally.</p> <p>24 MR. LEE: Objection.</p> <p>25 Q. Generally, in the category of</p>
<p style="text-align: right;">Page 271</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. And in their evaluations,</p> <p>3 without discussing at this point what the</p> <p>4 evaluations were, can you tell me what</p> <p>5 some of items are that are considered in</p> <p>6 your evaluation?</p> <p>7 A. I don't have a copy so it's</p> <p>8 hard for me to say. We talk about</p> <p>9 performance. We talk about ability to</p> <p>10 relate with other staff. We talk about</p> <p>11 clinical judgment. We talk about if we</p> <p>12 have this sense of cooperativeness with</p> <p>13 the department. We also talk about our</p> <p>14 knowledge of medicine or psychiatry.</p> <p>15 That's all I can remember.</p> <p>16 Q. In your evaluation has any of</p> <p>17 your evaluations criticized your clinical</p> <p>18 judgment?</p> <p>19 MR. RADOMISLI: Objection based</p> <p>20 on the --</p> <p>21 MR. CALLAN: Yeah, objection.</p> <p>22 MR. RADOMISLI: -- and based on</p> <p>23 Education Law 6527.</p> <p>24 MR. CALLAN: I join in the</p> <p>25 objection, and you're directed not to</p>	<p style="text-align: right;">Page 273</p> <p>1 L. ALDANA-BERNIER</p> <p>2 performance, does that include number of</p> <p>3 patients seen?</p> <p>4 A. No.</p> <p>5 Q. Do you know how many patients</p> <p>6 you saw last year at Jamaica Hospital?</p> <p>7 A. I would not remember that.</p> <p>8 Q. Is there a way that you can</p> <p>9 ascertain that kind of information?</p> <p>10 A. I have to go to the financial</p> <p>11 department and see how many patients I</p> <p>12 have seen. I don't know.</p> <p>13 Q. That would be the same for</p> <p>14 patients that you saw in 2009?</p> <p>15 MR. CALLAN: You mean did she</p> <p>16 see the exact number of patients?</p> <p>17 Q. In order to find out how many</p> <p>18 you saw, you would have to go to the</p> <p>19 financial department?</p> <p>20 A. Financial department because</p> <p>21 they have to do the billing. I don't</p> <p>22 bill.</p> <p>23 Q. So in order to find out how</p> <p>24 many patients you saw if you wanted, you</p> <p>25 would have to go to the billing or</p>

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<p style="text-align: right;">Page 274</p> <p>1 L. ALDANA-BERNIER 2 financial department, correct? 3 MR. CALLAN: Do you know if they 4 can isolate it by doctor name or are 5 you assuming? 6 THE WITNESS: I do not know how. 7 MR. CALLAN: Just tell him that. 8 MR. SMITH: Let her speak. 9 Don't interrupt. Let her answer the 10 question for God's sake. 11 MR. CALLAN: Do you know for a 12 fact if they have the software or 13 computer program to isolate it by 14 doctor per patient, do you know that? 15 THE WITNESS: No, I don't. 16 Q. Doctor, does Jamaica Hospital 17 have a billing department? 18 A. They do. 19 Q. When you see a patient, are you 20 required to fill out any paperwork so 21 that the patient's insurance company will 22 be billed if there is an insurance 23 company? 24 A. I'm not the one that do the 25 billing.</p>	<p style="text-align: right;">Page 276</p> <p>1 L. ALDANA-BERNIER 2 and some aren't HMOs. 3 And does the federal government 4 require prior approval on their Medicare? 5 A. If they are not HMOs, you don't 6 to ask for authorization. 7 Q. How about Medicaid, is prior 8 approval required before admission? 9 A. No. 10 Q. Just as a housekeeping thing: 11 Are you paid for your overtime hours? 12 A. No. 13 Q. You have actually in front of 14 you, you know at some point IAB, internal 15 affairs from the New York City Police 16 Department did come to the hospital based 17 on the records in front of you, correct? 18 MR. CALLAN: Is that a question, 19 does she know that? 20 MR. SUCKLE: Yes. 21 Q. Based on the record in front of 22 you? 23 A. Yes, I know there is a note. 24 Q. What is the date of that note? 25 A. That's 11/2/2009, five o'clock</p>
<p style="text-align: right;">Page 275</p> <p>1 L. ALDANA-BERNIER 2 Q. Do you fill out any forms or 3 documents that go to billing so they can 4 bill the patient for your services? 5 A. Yes, I fill out a form. 6 Q. What is the nature of that 7 form, what is it? 8 A. It's a form that I sign that I 9 saw the patient. 10 Q. Do patients who come in with 11 private insurance, do they get admitted, 12 do you need approval from time to time 13 from private insurance before they get 14 admitted; just generally we're talking 15 about? 16 A. Let me see. 17 Q. I'm talking generally. 18 A. Yes. 19 Q. Not Mr. Schoolcraft. 20 A. Yes. 21 Q. What about for Medicare, do 22 they need approval before a patient is 23 admitted? 24 A. That depends if it's an HMO. 25 Q. So some HMOs require approval</p>	<p style="text-align: right;">Page 277</p> <p>1 L. ALDANA-BERNIER 2 in the afternoon. 3 Q. So that note was in the chart 4 before you signed your November 3rd, 5 mental hygiene admission form, correct? 6 A. That's correct. 7 Q. So you know that internal 8 affairs had come to the hospital before 9 you decided to admit Mr. Schoolcraft to 10 the hospital? 11 MR. CALLAN: Objection. She 12 testified earlier she made the 13 decision to admit him on the 2nd not 14 on the 3rd. She filled out the form 15 on the 3rd. You're mischaracterizing 16 testimony. 17 Q. Before you filled out the form 18 to admit Mr. Schoolcraft under the Mental 19 Hygiene Law, you knew that IAB had come 20 to the hospital, correct? 21 MR. SHAFFER: Objection. 22 A. The notes are here from 11/2. 23 Q. So the answer is yes, you knew 24 that IAB had come to the hospital before 25 you signed the admission forms on 11/3,</p>

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<p style="text-align: right;">Page 278</p> <p>1 L. ALDANA-BERNIER 2 correct? 3 A. I must have read the notes. 4 MR. SMITH: What was the answer? 5 THE WITNESS: I must have read 6 the note. 7 Q. Did you speak to the officer 8 from IAB and ask them whether or not Mr. 9 Schoolcraft had told them the story about 10 the problem with his supervisor that Mr. 11 Schoolcraft told to you? 12 MR. SHAFFER: Objection. 13 A. It was at five o'clock. I was 14 not there. It was at 9:30. I'm not 15 there anymore [indicating]. 16 Q. In fact one of the officers 17 from IAB stapled -- gave his card and it 18 was taped to the chart, correct? 19 MR. CALLAN: She said she wasn't 20 there when they were there. 21 Q. The chart you have in front of 22 you, correct? 23 A. Yes. 24 Q. Yes. And when you went to sign 25 your admission under the Mental Hygiene</p>	<p style="text-align: right;">Page 280</p> <p>1 L. ALDANA-BERNIER 2 Schoolcraft's story? 3 MR. CALLAN: Objection. 4 MR. SHAFFER: Objection. 5 MR. SMITH: What was the answer? 6 THE REPORTER: I didn't get an 7 answer yet. 8 Q. What's your answer. 9 A. I wouldn't know because I don't 10 know if I saw the card or not. 11 Q. Had you seen the card before 12 you signed the mental hygiene admission 13 on the 3rd, would you have called 14 internal affairs? 15 A. I did not see these cards 16 before so I don't know if I would have 17 called internal affairs. 18 Q. So now you are saying you know 19 you did not see the cards? 20 A. I do not know if I saw these 21 cards. I don't remember seeing them. 22 Q. And you don't remember if you 23 would have called internal affairs? 24 A. I didn't see the card. 25 Q. You know you did not see the</p>
<p style="text-align: right;">Page 279</p> <p>1 L. ALDANA-BERNIER 2 Law on November 3rd, that card was in the 3 chart, correct? 4 MR. CALLAN: How do we know when 5 the card was stapled in? 6 MR. SUCKLE: Let her answer. If 7 she doesn't know, she'll tell me. 8 MR. CALLAN: You're making these 9 things up in your question. 10 MR. SUCKLE: I'm making up 11 nothing. I'm -- 12 MR. CALLAN: You are. You said 13 the IAB officer stapled the card into 14 the card. 15 MR. SUCKLE: I didn't say that. 16 MR. CALLAN: Who stapled that 17 in? 18 MR. SUCKLE: Nobody, it's taped. 19 Q. Can we have an answer to the 20 question, please? 21 A. I don't remember. I do not 22 remember seeing this card. 23 Q. If that card was in the chart, 24 would you have called that officer from 25 internal affairs to verify Mr.</p>	<p style="text-align: right;">Page 281</p> <p>1 L. ALDANA-BERNIER 2 cards? 3 A. I do not know. I do not 4 remember. It was that 2009. 5 Q. So the answer is, am I correct, 6 you don't know if you saw the cards and 7 you don't know what you would have done 8 if you did see the cards, am I correct, 9 is that the answer? 10 MR. CALLAN: Objection. 11 Q. You can answer. 12 A. I do not know if I would have 13 called them. 14 Q. Looking at the note of November 15 2nd, 2009, at 9:30, do you see that note? 16 A. P.m.? 17 Q. Yes. 18 Do you see that note? 19 A. Yes. 20 Q. And that is before your 21 November 3rd, 1:20 note where you signed 22 the form, the mental hygiene admission, 23 correct? 24 A. Yes. 25 Q. And did you read the chart</p>

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<p style="text-align: right;">Page 282</p> <p>1 L. ALDANA-BERNIER</p> <p>2 where it says, "Patient has been seen and</p> <p>3 interviewed by Detective Steven P. Wacter</p> <p>4 [phonetic] and Sergeant Scott from</p> <p>5 Internal Affairs Bureau"?</p> <p>6 A. Yes.</p> <p>7 Q. Would you want to know what</p> <p>8 internal affairs had to see about Mr.</p> <p>9 Schoolcraft in coming to your opinion</p> <p>10 regarding whether or not he needed to be</p> <p>11 admitted to the hospital?</p> <p>12 MR. SHAFFER: Objection.</p> <p>13 A. I was wondering why the</p> <p>14 attending put this note and did not write</p> <p>15 any note about what interaction happened</p> <p>16 with internal affairs.</p> <p>17 Q. When you say you were wondering</p> <p>18 about it --</p> <p>19 A. There's nothing.</p> <p>20 Q. When were you wondering about</p> <p>21 it?</p> <p>22 A. Now.</p> <p>23 Q. Why were you wondering about</p> <p>24 it?</p> <p>25 A. Should have written a note.</p>	<p style="text-align: right;">Page 284</p> <p>1 L. ALDANA-BERNIER</p> <p>2 notes that you think would have been</p> <p>3 helpful in coming to your decision as to</p> <p>4 whether or not Mr. Schoolcraft needed to</p> <p>5 be admitted?</p> <p>6 MR. RADOMISLI: Objection to</p> <p>7 form.</p> <p>8 MR. CALLAN: How would she know?</p> <p>9 MR. SUCKLE: She was the one</p> <p>10 that said something should have been</p> <p>11 there.</p> <p>12 MR. CALLAN: You are the one</p> <p>13 talking about cards stapled into a</p> <p>14 chart.</p> <p>15 MR. SUCKLE: The record is what</p> <p>16 the record is. You are just playing</p> <p>17 games now.</p> <p>18 MR. CALLAN: It's nonsense.</p> <p>19 MR. SUCKLE: It's nonsense?</p> <p>20 MR. CALLAN: Right.</p> <p>21 MR. SUCKLE: A doctor has a note</p> <p>22 in front of her and she signs a day</p> <p>23 later, you think it's nonsense.</p> <p>24 MR. CALLAN: It is.</p> <p>25 MR. SUCKLE: Let's go.</p>
<p style="text-align: right;">Page 283</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. When you say "should have</p> <p>3 written a note," what should he have</p> <p>4 written about?</p> <p>5 A. His interaction with internal</p> <p>6 affairs.</p> <p>7 Q. Would that have been helpful to</p> <p>8 you in your care and treatment with Mr.</p> <p>9 Schoolcraft?</p> <p>10 A. In deciding to admit him or</p> <p>11 not?</p> <p>12 Q. Yes.</p> <p>13 A. I already made my decision</p> <p>14 before that. On 11/1 I made the decision</p> <p>15 of admission.</p> <p>16 Q. Was your decision irreversible</p> <p>17 once you made it?</p> <p>18 A. I think that he would benefit</p> <p>19 from inpatient admission.</p> <p>20 Q. When you say "he would</p> <p>21 benefit," what do you mean?</p> <p>22 A. I thought at the time in 2009</p> <p>23 that he would be a danger to himself or</p> <p>24 others.</p> <p>25 Q. The question was: Would the</p>	<p style="text-align: right;">Page 285</p> <p>1 L. ALDANA-BERNIER</p> <p>2 MR. CALLAN: She's got one note</p> <p>3 in the chart, it's only taken us six</p> <p>4 hours to question her so....</p> <p>5 MR. SUCKLE: Maybe we should</p> <p>6 have taken six hours to evaluate the</p> <p>7 patient.</p> <p>8 Q. The notes you said should have</p> <p>9 been there, would that have been helpful</p> <p>10 to you in your decision to admit Mr.</p> <p>11 Schoolcraft?</p> <p>12 MR. SHAFFER: Objection to form.</p> <p>13 MR. CALLAN: Objection to form.</p> <p>14 MR. SUCKLE: It hasn't been</p> <p>15 answered.</p> <p>16 MR. RADOMISLI: It has actually.</p> <p>17 MR. CALLAN: Asked and answered,</p> <p>18 Counsel.</p> <p>19 There is nothing in the note</p> <p>20 except that IAB was there.</p> <p>21 MR. SUCKLE: The note she said</p> <p>22 should have been there.</p> <p>23 MR. CALLAN: She is supposed to</p> <p>24 make up a note now and answer a</p> <p>25 hypothetical?</p>

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<p style="text-align: right;">Page 286</p> <p>1 L. ALDANA-BERNIER</p> <p>2 MR. SUCKLE: She said a note</p> <p>3 should be there. I'm asking about the</p> <p>4 note that should have been there.</p> <p>5 A. Not my note.</p> <p>6 Q. I understand.</p> <p>7 The note that should have been</p> <p>8 there, would they have mattered in your</p> <p>9 decision to admit Mr. Schoolcraft?</p> <p>10 MR. SHAFFER: Objection to form.</p> <p>11 MR. RADOMISLI: Objection to</p> <p>12 form, asked and answered.</p> <p>13 MR. SUCKLE: I didn't get an</p> <p>14 answer. I've asked it.</p> <p>15 MR. SHAFFER: It's impossible to</p> <p>16 answer the question. The information</p> <p>17 doesn't exist. It's impossible to</p> <p>18 answer.</p> <p>19 Let's stop playing games and</p> <p>20 move this along. You cannot answer a</p> <p>21 question about something that does not</p> <p>22 exist.</p> <p>23 Q. Please answer the question?</p> <p>24 MR. CALLAN: Can you answer the</p> <p>25 question, Doctor?</p>	<p style="text-align: right;">Page 288</p> <p>1 L. ALDANA-BERNIER</p> <p>2 all day.</p> <p>3 MR. CALLAN: Are you involved in</p> <p>4 this?</p> <p>5 MR. SMITH: Yes, heavily and</p> <p>6 you're going to become more involved</p> <p>7 in this with this kind of</p> <p>8 irresponsible behavior.</p> <p>9 MR. CALLAN: There is one</p> <p>10 attorney designated to represent the</p> <p>11 Plaintiff. It's not you today. You</p> <p>12 are just running the home movie</p> <p>13 camera.</p> <p>14 MR. SMITH: Would you please</p> <p>15 stop interfering?</p> <p>16 MR. SUCKLE: Excuse me. No</p> <p>17 matter how much you pontificate, we</p> <p>18 are not going home until we are done.</p> <p>19 I'm going to keep asking until I</p> <p>20 get an answer. I'm going to keep</p> <p>21 asking.</p> <p>22 MR. CALLAN: Try to ask a</p> <p>23 relevant question.</p> <p>24 MR. SUCKLE: I haven't been able</p> <p>25 to all day, that's why we're here.</p>
<p style="text-align: right;">Page 287</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. I already made my decision. I</p> <p>3 cannot answer the question.</p> <p>4 Q. Once your made your decision?</p> <p>5 A. The patient needed admission.</p> <p>6 I felt that at that point on 11/1 that</p> <p>7 the patient needed inpatient</p> <p>8 stabilization.</p> <p>9 Q. So just so we are clear here:</p> <p>10 No information from IAB would have</p> <p>11 changed your mind, correct, from internal</p> <p>12 affairs?</p> <p>13 MR. KRETZ: Objection.</p> <p>14 MR. CALLAN: Same objection.</p> <p>15 A. Then I would have to make the</p> <p>16 chairman make the decision.</p> <p>17 Q. So if IAB had information, you</p> <p>18 would want the chairman to make the</p> <p>19 decision?</p> <p>20 MR. CALLAN: Objection. This is</p> <p>21 ridiculous.</p> <p>22 MR. SMITH: Would you stop.</p> <p>23 Would you please stop. I'm sick and</p> <p>24 tired of you interrupting this</p> <p>25 examination. You've been doing this</p>	<p style="text-align: right;">Page 289</p> <p>1 L. ALDANA-BERNIER</p> <p>2 I'm trying.</p> <p>3 MR. CALLAN: Work harder at it.</p> <p>4 MR. SUCKLE: Maybe you'll teach</p> <p>5 me one day.</p> <p>6 A. What do the think internal</p> <p>7 affairs would tell me?</p> <p>8 MR. CALLAN: Doctor, you have to</p> <p>9 wait for the question.</p> <p>10 Q. There was nothing internal</p> <p>11 affairs could have told you to change</p> <p>12 your mind, you already made your decision</p> <p>13 and whatever internal affairs had to say,</p> <p>14 you were not going to change your mind,</p> <p>15 correct?</p> <p>16 A. Is internal affairs reliable?</p> <p>17 Q. That's a good questions. Can</p> <p>18 you answer my question?</p> <p>19 A. So I have to determine how</p> <p>20 reliable internal affairs is.</p> <p>21 Q. How do you determine whether or</p> <p>22 not internal affairs is reliable?</p> <p>23 A. Because I have to assess them</p> <p>24 too.</p> <p>25 Q. In assessing them, how would</p>

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<p style="text-align: right;">Page 290</p> <p>1 L. ALDANA-BERNIER</p> <p>2 you do that?</p> <p>3 A. Collaborate what I have seen</p> <p>4 and what they tell me.</p> <p>5 Q. So you would need to hear what</p> <p>6 internal affairs has to say and evaluate</p> <p>7 whether or not you can believe them or</p> <p>8 not, correct?</p> <p>9 A. Yes.</p> <p>10 Q. Did you evaluate the police</p> <p>11 officer who reported that Mr. Schoolcraft</p> <p>12 had barricaded himself in his house, did</p> <p>13 you evaluate that person?</p> <p>14 MR. SHAFFER: Objection.</p> <p>15 A. He wasn't there. I didn't see</p> <p>16 him.</p> <p>17 Q. So but you accepted his</p> <p>18 information as part of the basis of your</p> <p>19 diagnosis, correct?</p> <p>20 A. And the documentation.</p> <p>21 Q. Documentation somebody else</p> <p>22 wrote in a chart, correct?</p> <p>23 A. That I saw Mr. Schoolcraft and</p> <p>24 I agreed to whatever the documentation of</p> <p>25 the resident was.</p>	<p style="text-align: right;">Page 292</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Do you have the duty as a</p> <p>3 physician in accordance with good and</p> <p>4 accepted medical practice to conduct your</p> <p>5 own evaluation of a patient?</p> <p>6 A. I do.</p> <p>7 Q. Do you as a physician have in</p> <p>8 accordance with good and accepted medical</p> <p>9 practice have to do a complete evaluation</p> <p>10 of your patients?</p> <p>11 A. I agree with the evaluation of</p> <p>12 the resident. I saw the patient. I</p> <p>13 agree whatever evaluation of resident was</p> <p>14 and that's it. I have written in my</p> <p>15 notes --</p> <p>16 Q. I understand.</p> <p>17 My question is not quite that.</p> <p>18 Do you have a duty, does good</p> <p>19 and accepted medical practice require you</p> <p>20 to do a complete evaluation of your</p> <p>21 patients; that's the question?</p> <p>22 A. I'm in agreement with the</p> <p>23 resident.</p> <p>24 Q. Yes or no, do you have a duty</p> <p>25 within the bounds of good and accepted</p>
<p style="text-align: right;">Page 291</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. When you saw Mr. Schoolcraft,</p> <p>3 you agreed he had barricaded himself in</p> <p>4 his house?</p> <p>5 A. That is the information given.</p> <p>6 Q. Written in the chart?</p> <p>7 A. Information given in the chart.</p> <p>8 Q. By some police officer or</p> <p>9 sergeant from the police department,</p> <p>10 correct?</p> <p>11 A. Hold on. Also have the</p> <p>12 documentation from the EMS.</p> <p>13 Q. Did you speak to EMS?</p> <p>14 A. Documentation is here.</p> <p>15 Q. Documentation meaning a note?</p> <p>16 A. Yes.</p> <p>17 Q. So EMS writes a note and you</p> <p>18 accept what they say because it's written</p> <p>19 in the chart, correct?</p> <p>20 A. They were there. They went to</p> <p>21 pick up the patient.</p> <p>22 Q. But you are not sure if you</p> <p>23 would trust internal affairs; am I</p> <p>24 correct?</p> <p>25 A. That's a big question.</p>	<p style="text-align: right;">Page 293</p> <p>1 L. ALDANA-BERNIER</p> <p>2 medical practice to do a complete</p> <p>3 evaluation of your patient?</p> <p>4 MR. CALLAN: Objection to form.</p> <p>5 MR. LEE: Objection.</p> <p>6 Q. Does good and accepted medical</p> <p>7 practice require you to do a complete</p> <p>8 evaluation of your patient?</p> <p>9 A. I did evaluation. I'm in</p> <p>10 agreement with the resident.</p> <p>11 MR. CALLAN: Objection.</p> <p>12 Q. You can't answer that question?</p> <p>13 A. I consider that in agreement</p> <p>14 with my resident.</p> <p>15 Q. I'm not talking about conduct</p> <p>16 here. I'm talking about a standard of</p> <p>17 practice. The standard of practice is</p> <p>18 what we are talking about now.</p> <p>19 The question is: Does good and</p> <p>20 accepted medical practice require you to</p> <p>21 do a complete evaluation; that's the</p> <p>22 question?</p> <p>23 MR. KRETZ: Objection.</p> <p>24 A. I mention to you I did an</p> <p>25 evaluation and I agree with whatever</p>

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<p style="text-align: right;">Page 294</p> <p>1 L. ALDANA-BERNIER</p> <p>2 evaluation of the resident.</p> <p>3 Q. I understand what you think you</p> <p>4 did in Mr. Schoolcraft's situation.</p> <p>5 I'm asking as a standard as a</p> <p>6 physician what the standards are.</p> <p>7 My question is: Does good and</p> <p>8 accepted medical practice require you to</p> <p>9 do a complete evaluation of all of your</p> <p>10 patients?</p> <p>11 A. Okay. If you are saying in</p> <p>12 general if we agree with the evaluation</p> <p>13 of the residents, we usually say I agree</p> <p>14 with the above evaluation of the patient.</p> <p>15 Yes, we evaluate the patient.</p> <p>16 If we agree with the assessment whatever</p> <p>17 the residents say, that's what we</p> <p>18 document.</p> <p>19 Q. Do you not understand my</p> <p>20 question?</p> <p>21 A. I understand your question.</p> <p>22 Q. But you are just refusing to</p> <p>23 answer?</p> <p>24 MR. CALLAN: Next question.</p> <p>25 Move on.</p>	<p style="text-align: right;">Page 296</p> <p>1 L. ALDANA-BERNIER</p> <p>2 patient.</p> <p>3 Q. Do you know what medical</p> <p>4 standards are, standards of practice, do</p> <p>5 you understand that?</p> <p>6 A. But you --</p> <p>7 Q. I'm talking about general</p> <p>8 standards of practice. Do you</p> <p>9 understand?</p> <p>10 A. Yes, I'm saying --</p> <p>11 Q. I'm not talking about what you</p> <p>12 did with Mr. Schoolcraft.</p> <p>13 A. I'm not referring only to Mr.</p> <p>14 Schoolcraft.</p> <p>15 Q. The question is: Do you have,</p> <p>16 a simple yes or no, does good and</p> <p>17 accepted medical practice require you to</p> <p>18 do your own independent evaluation of an</p> <p>19 a patient?</p> <p>20 MR. CALLAN: Objection to the</p> <p>21 form.</p> <p>22 Q. If it's no you can tell me no.</p> <p>23 MR. CALLAN: What do you mean,</p> <p>24 your own independent evaluation as</p> <p>25 opposed to speaking to a resident, as</p>
<p style="text-align: right;">Page 295</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Doctor, does good and accepted</p> <p>3 medical practice require you to do an</p> <p>4 independent evaluation of your patient?</p> <p>5 MR. CALLAN: We have been down</p> <p>6 that road, Counsel. She did an</p> <p>7 independent. She read --</p> <p>8 MR. SUCKLE: I'm asking about</p> <p>9 standard in the field. Maybe I</p> <p>10 learned it, somewhere I must have</p> <p>11 stumbled in somewhere about the</p> <p>12 standard so I'm going to ask. I might</p> <p>13 be right.</p> <p>14 Q. Doctor, does good and accepted</p> <p>15 medical practice require you to do an</p> <p>16 independent evaluation of all of your</p> <p>17 patients?</p> <p>18 A. I already answered you. I said</p> <p>19 I assessed the patient. And if the</p> <p>20 resident assessed also the patient, I</p> <p>21 will say that I agree with the assessment</p> <p>22 of the patient.</p> <p>23 Q. Do you know what good and</p> <p>24 accepted medical practice means?</p> <p>25 A. I said I did assess the</p>	<p style="text-align: right;">Page 297</p> <p>1 L. ALDANA-BERNIER</p> <p>2 opposed to calling people?</p> <p>3 MR. SUCKLE: Yes.</p> <p>4 MR. CALLAN: Then ask it that</p> <p>5 way.</p> <p>6 MR. SUCKLE: It's pretty clear.</p> <p>7 MR. CALLAN: They way you're</p> <p>8 asking it is totally unclear.</p> <p>9 MR. SUCKLE: It's one of those</p> <p>10 things I have to learn from you again.</p> <p>11 Thanks for teaching me.</p> <p>12 Q. Can you please answer my</p> <p>13 question, Doctor? We are going to be</p> <p>14 here all night if you don't answer these</p> <p>15 few questions.</p> <p>16 MR. CALLAN: I can assure we are</p> <p>17 not going to be here all night. We're</p> <p>18 getting very close to you being</p> <p>19 abusive.</p> <p>20 Q. I'm entitled to be here. We</p> <p>21 will bring you back to answer this last</p> <p>22 few series of questions which go to</p> <p>23 standard of care.</p> <p>24 MR. CALLAN: Sure you will.</p> <p>25 MR. SUCKLE: I absolutely will</p>

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<p style="text-align: right;">Page 298</p> <p>1 L. ALDANA-BERNIER 2 bring her back if she can't answer 3 standard of care questions. I will. 4 You might want to ask her to answer 5 the questions. I will bring her back 6 if she doesn't answer standard of care 7 questions. 8 MR. RADOMISLI: Off the record. 9 MR. SMITH: Off the record at 10 6:05 p.m. 11 [Discussion held off the 12 record.] 13 [Whereupon, at 6:05 p.m., a 14 recess was taken.] 15 [Whereupon, at 6:06 p.m., the 16 testimony continued.] 17 [Discussion held off the 18 record.] 19 MR. SMITH: Back on the record 20 at 6:06. 21 Q. Doctor, I'm not talking about 22 what you documented or didn't document. 23 I'm just talking about standard of care 24 as a physician. 25 The question is: Does good and</p>	<p style="text-align: right;">Page 300</p> <p>1 L. ALDANA-BERNIER 2 record was read.] 3 Q. And make your own independent 4 evaluation, correct? 5 A. Yes. 6 MR. SHAFFER: Is that a yes? 7 MR. CALLAN: It's a yes. 8 Q. Doctor, have you ever been 9 involved in any other lawsuits besides 10 this one? 11 A. Yes. 12 Q. The answer was yes? 13 A. Yes. 14 Q. When you say yes, how many? 15 A. Two that I know of. 16 Q. When you say that you know of, 17 why do you answer that way? 18 A. That's what I know. 19 Q. Do you keep open there is a 20 possibility that there are lawsuits that 21 you don't know about? 22 A. That's what I know. You are 23 asking me. 24 Q. Do you know the names of those 25 people that are suing you?</p>
<p style="text-align: right;">Page 299</p> <p>1 L. ALDANA-BERNIER 2 accepted medical practice require you to 3 do your own independent evaluation 4 regardless of how you document that 5 evaluation? 6 MR. CALLAN: Objection to the 7 form of the question. 8 You can answer. 9 A. When a resident sees the 10 patient, after the resident sees the 11 patient, I do go see the patient. If I 12 can agree with the documentation, then I 13 write I agree with the documentation. 14 Q. I understand your procedure. 15 Thank for telling me your procedure. 16 Does good and accepted medical 17 practice require you, forget what you do, 18 does it require you to do your own 19 independent evaluation? That's a simple, 20 straightforward question, not about what 21 other people do, about what you do. 22 A. I have to see every patient, 23 yes. 24 MR. SMITH: What was the answer. 25 [The requested portion of the</p>	<p style="text-align: right;">Page 301</p> <p>1 L. ALDANA-BERNIER 2 MR. CALLAN: You can answer 3 that, Doctor, if you have a 4 recollection of names. 5 A. One is McDougal [phonetic]. 6 Q. Was that in your capacity as an 7 employee at Jamaica Hospital, your 8 private practice, something else? 9 A. Jamaica Hospital. 10 Q. Do you know generally what the 11 claims against you were? 12 A. It's about admitting the 13 patient. 14 Q. An admission under 9.39 of 15 Mental Hygiene Law? 16 A. Yes. 17 Q. Is that matter still pending? 18 A. No, it was cleared. 19 Q. Who represented you in this 20 case? 21 A. The office of Mr. Callan. 22 Q. Did you testify at a deposition 23 in that case? 24 A. Yes. 25 Q. Did you testify at trial in</p>

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<p style="text-align: right;">Page 302</p> <p>1 L. ALDANA-BERNIER</p> <p>2 that case?</p> <p>3 A. No.</p> <p>4 Q. You said there were two</p> <p>5 matters. What is the other matter?</p> <p>6 A. Ballek.</p> <p>7 Q. Spell that for me?</p> <p>8 A. B-A-L-L-E-K.</p> <p>9 Q. Again, was that in your</p> <p>10 capacity as an employee of Jamaica</p> <p>11 Hospital?</p> <p>12 A. Yes.</p> <p>13 Q. What were the claims against</p> <p>14 you in that cases?</p> <p>15 A. I discharged the patient and</p> <p>16 the patient after 30 days they found out</p> <p>17 committed suicide.</p> <p>18 Q. When was that admission that</p> <p>19 was the subject of that lawsuit?</p> <p>20 A. 2008.</p> <p>21 Q. Do you know when in 2008 he</p> <p>22 ended up committing suicide?</p> <p>23 A. I don't know. I don't</p> <p>24 remember.</p> <p>25 Q. Was that incident in your mind</p>	<p style="text-align: right;">Page 304</p> <p>1 L. ALDANA-BERNIER</p> <p>2 patient.</p> <p>3 Q. Were you more cautious after</p> <p>4 that incident you are talking about when</p> <p>5 this person killed himself in 2008?</p> <p>6 MR. CALLAN: Objection.</p> <p>7 A. It's the same.</p> <p>8 Q. Is that lawsuit still pending?</p> <p>9 A. No, cleared.</p> <p>10 Q. Who represented you in that</p> <p>11 case?</p> <p>12 A. Mr. Callan.</p> <p>13 Q. And McDougal, do you know what</p> <p>14 court that was in?</p> <p>15 A. Manhattan.</p> <p>16 Q. State court, federal court?</p> <p>17 A. I think state court.</p> <p>18 Q. What about Ballek?</p> <p>19 A. Federal.</p> <p>20 MR. CALLAN: Supreme Court,</p> <p>21 Queens County, in any effort to be</p> <p>22 cooperative.</p> <p>23 Q. Have you ever had any hospital</p> <p>24 privileges revoked or suspended?</p> <p>25 A. No.</p>
<p style="text-align: right;">Page 303</p> <p>1 L. ALDANA-BERNIER</p> <p>2 when you evaluated Mr. Schoolcraft?</p> <p>3 A. I learned from experience.</p> <p>4 Q. When you say you learned from</p> <p>5 experience, the answer is yes, that</p> <p>6 incident was in your mind when you</p> <p>7 evaluated Mr. Schoolcraft?</p> <p>8 A. No, because this case, it</p> <p>9 happened 2008 but the case was cleared in</p> <p>10 2013.</p> <p>11 Q. I'm talking about the lawsuit.</p> <p>12 I'm talking about the incident where the</p> <p>13 man committed suicide. Was that part of</p> <p>14 your thought process when you admitted</p> <p>15 Mr. Schoolcraft: having had the</p> <p>16 experience of a patient committing</p> <p>17 suicide after being released?</p> <p>18 A. Working in the emergency room,</p> <p>19 you have to be cautious. You have to</p> <p>20 make very defensive decisions when you</p> <p>21 discharge the patient.</p> <p>22 Q. When you say "cautious," what</p> <p>23 do you mean?</p> <p>24 A. You are thinking right, proper,</p> <p>25 you are either keeping or discharging the</p>	<p style="text-align: right;">Page 305</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. Have your licenses ever been</p> <p>3 revoked or suspended?</p> <p>4 A. Never.</p> <p>5 Q. Have you ever had any sanctions</p> <p>6 at all with regard to your profession as</p> <p>7 a physician?</p> <p>8 A. Never.</p> <p>9 Q. As part of your education or</p> <p>10 are you required to do continuing</p> <p>11 education?</p> <p>12 A. Yes.</p> <p>13 Q. As part of your formal</p> <p>14 education or continuing education, did</p> <p>15 you ever do any training in danger</p> <p>16 assessment?</p> <p>17 A. Training in danger assessment.</p> <p>18 Q. The danger of a patient</p> <p>19 injuring themselves or others?</p> <p>20 A. Risk management you mean?</p> <p>21 Q. I will rephrase it.</p> <p>22 Did you have any training with</p> <p>23 regard to assessing a patient with regard</p> <p>24 to whether or not they were a danger to</p> <p>25 themselves or to others?</p>

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<p style="text-align: right;">Page 306</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. If you are talking about CME</p> <p>3 with regard to risk management, I think</p> <p>4 that comes under that title, yes.</p> <p>5 Q. When it comes under risk</p> <p>6 management, how does it come under risk</p> <p>7 management, management of the risk of the</p> <p>8 patient?</p> <p>9 A. Yes.</p> <p>10 Q. Earlier you talked about risk</p> <p>11 management when you got the lawsuit, they</p> <p>12 contacted you.</p> <p>13 A. Yes.</p> <p>14 Q. Different risk management?</p> <p>15 A. Yes.</p> <p>16 Q. So risk management of the</p> <p>17 patient?</p> <p>18 A. Of the patient, yes.</p> <p>19 Q. Where and when did you have</p> <p>20 this education regarding risk management?</p> <p>21 A. With Florida CME.</p> <p>22 Q. What is a CME?</p> <p>23 A. Medical education credit.</p> <p>24 Q. You say Florida, is that the</p> <p>25 location where the course was given?</p>	<p style="text-align: right;">Page 308</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. I'm not sure but maybe '95.</p> <p>3 Q. How about West Virginia?</p> <p>4 A. Very first one, maybe '93.</p> <p>5 Q. When did you get New York?</p> <p>6 A. '94.</p> <p>7 Q. Did you sit for any licensing</p> <p>8 exams that you did not pass?</p> <p>9 A. Yes.</p> <p>10 Q. Where?</p> <p>11 A. That's my -- that's the --</p> <p>12 what-do-you-call-it? I'm blocking.</p> <p>13 MR. CALLAN: He is asking about</p> <p>14 medical licenses, your MD exams, West</p> <p>15 Virginia, Florida, New York?</p> <p>16 A. No.</p> <p>17 Q. Any other state that you did</p> <p>18 not pass the MD license?</p> <p>19 MR. CALLAN: MD.</p> <p>20 A. That was the Flex. Sorry, yes,</p> <p>21 it was the Flex.</p> <p>22 Q. What is the Flex?</p> <p>23 A. That's our licensing.</p> <p>24 Q. And you did not pass that?</p> <p>25 A. No, I pass it now.</p>
<p style="text-align: right;">Page 307</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. It's required by the State of</p> <p>3 Florida.</p> <p>4 Q. Are you licensed in the state</p> <p>5 of Florida?</p> <p>6 A. Yes.</p> <p>7 Q. Where else besides Florida and</p> <p>8 New York are you licensed?</p> <p>9 A. West Virginia.</p> <p>10 Q. Did you ever practice in</p> <p>11 Florida?</p> <p>12 A. No.</p> <p>13 Q. How about West Virginia?</p> <p>14 A. No.</p> <p>15 Q. Have you ever lived in Florida?</p> <p>16 A. No.</p> <p>17 Q. How about West Virginia?</p> <p>18 A. No.</p> <p>19 Q. Any particular reason you have</p> <p>20 those licenses?</p> <p>21 A. Just in case.</p> <p>22 Q. When did you get those</p> <p>23 licenses?</p> <p>24 MR. CALLAN: She's ready to go</p> <p>25 now.</p>	<p style="text-align: right;">Page 309</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Q. When did you not pass it?</p> <p>3 A. There was one in -- before my</p> <p>4 '93 licensure.</p> <p>5 Q. Do you know why Mr. Schoolcraft</p> <p>6 was admitted to the medical emergency</p> <p>7 part of the hospital as opposed to the</p> <p>8 psych part of the hospital when he first</p> <p>9 came to the hospital?</p> <p>10 A. He was complaining of abdominal</p> <p>11 pain.</p> <p>12 Q. From your review of the</p> <p>13 hospital record, did you see any</p> <p>14 treatment for abdominal pain?</p> <p>15 A. Did I see any treatment?</p> <p>16 Q. At the hospital given to him</p> <p>17 for abdominal pain?</p> <p>18 MR. KRETZ: Objection.</p> <p>19 Q. In the hospital?</p> <p>20 A. I have to go back through the</p> <p>21 notes.</p> <p>22 Q. I'm also going to ask you about</p> <p>23 blood pressure so while you are looking</p> <p>24 at the medical records, I'm going to ask</p> <p>25 any treatment for blood pressure too</p>

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<p style="text-align: right;">Page 310</p> <p>1 L. ALDANA-BERNIER 2 while you're looking the medical records? 3 A. He had a physical exam. 4 Q. When you say "he had a physical 5 exam," how do you know that? 6 A. It's written down here in the 7 MD notes. 8 Q. When the doctor examined him, 9 the doctor made notes about that 10 examination? 11 A. Yes. 12 Q. Did the doctor also take a 13 history? 14 A. Yes. 15 Q. Doctor made notes of that 16 history? 17 A. Yes, it's here. 18 Q. Did the doctor come to any 19 evaluation or opinion or diagnosis? 20 A. History of present illness, he 21 has a review of systems, past medical 22 history, social history, family history. 23 Q. And he puts information in 24 those spots, right? 25 A. Excuse me?</p>	<p style="text-align: right;">Page 312</p> <p>1 L. ALDANA-BERNIER 2 MR. RADOMISLI: She didn't see 3 him in the medical ED, she didn't 4 review the medical ED chart before 5 coming here. 6 MR. SUCKLE: Your objection is 7 she might not know the answer? 8 MR. RADOMISLI: The objection is 9 you have no right to ask these 10 questions. 11 MR. SUCKLE: She is a treating 12 physician. 13 MR. CALLAN: She's a treating 14 psychiatrist. 15 MR. SUCKLE: When I get there. 16 MR. SHAFFER: Six hours to do 17 the deposition. 18 MR. RADOMISLI: Howard, you know 19 it's not separate. 20 Q. The question is: Was he ever 21 treated for his abdominal pain? 22 MR. CALLAN: Is there a claim 23 for abdominal failure -- failure to 24 treat -- 25 MR. SUCKLE: We're working on</p>
<p style="text-align: right;">Page 311</p> <p>1 L. ALDANA-BERNIER 2 Q. There's information, not just 3 printed form, there is a whole bunch of 4 information in all those categories, 5 correct? 6 A. Yes. 7 Q. So when the doctor evaluated 8 him, the doctor made notes of that 9 evaluation, correct? 10 A. It's here, yes. 11 Q. And the question is: Was this 12 patient ever treated for abdominal, given 13 any treatment for his abdominal pain or 14 high blood pressure? 15 MR. LEE: Objection to the form 16 of the question. 17 MR. RADOMISLI: Objection to the 18 form. 19 MR. SUCKLE: You want to do one 20 at a time: Was he ever treated for 21 abdominal? 22 MR. RADOMISLI: That's not the 23 basis for the objection. 24 MR. SUCKLE: What is the 25 objection?</p>	<p style="text-align: right;">Page 313</p> <p>1 L. ALDANA-BERNIER 2 it. 3 Q. Was he treated for any 4 abdominal -- 5 A. I wasn't in the emergency room. 6 If you want me to, I have to read -- 7 Q. You agree sometimes patients 8 come from the medical floor to the psych 9 floor, correct? 10 A. From the medical ER to the 11 psych ER, yes. 12 Q. Sometimes they come with 13 medical problems to the psych ER, 14 correct? 15 A. That's correct. 16 Q. When a patient comes from the 17 medical ER to the psych ER, do you 18 concern yourself at all with the medical 19 issues that the patient may be coming to 20 the psych ER with? 21 A. The patient was medically 22 cleared. 23 Q. But at least it was important 24 for you to know that the patient was 25 medically cleared, right?</p>

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<p style="text-align: right;">Page 314</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. Right.</p> <p>3 Q. What was the evaluation of for</p> <p>4 which he was cleared: abdomen, blood</p> <p>5 pressure, something else, nothing, you</p> <p>6 tell me?</p> <p>7 A. Gastric pain.</p> <p>8 Q. Was there any treatment that</p> <p>9 you are aware of he had while in the</p> <p>10 medical emergency room for that problem?</p> <p>11 MR. RADOMISLI: Objection.</p> <p>12 A. I was not in the medical ER.</p> <p>13 He came to the psych ER the next day.</p> <p>14 Q. The answer is you don't know;</p> <p>15 am I correct?</p> <p>16 MR. LEE: Objection to form.</p> <p>17 MR. RADOMISLI: Objection to</p> <p>18 form.</p> <p>19 Q. You don't know if he was</p> <p>20 treated for any gastrointestinal</p> <p>21 problems?</p> <p>22 MR. RADOMISLI: Objection.</p> <p>23 MR. SUCKLE: She just said she</p> <p>24 doesn't know. I'm asking her.</p> <p>25 MR. RADOMISLI: I'm objecting.</p>	<p style="text-align: right;">Page 316</p> <p>1 L. ALDANA-BERNIER</p> <p>2 regarding Adrian Schoolcraft?</p> <p>3 MR. CALLAN: She said no.</p> <p>4 A. At what point in time?</p> <p>5 Q. Any.</p> <p>6 A. I go to Dr. Dhar.</p> <p>7 Q. When you say "at what point in</p> <p>8 time," you gave an indication that you</p> <p>9 may have had a conversation.</p> <p>10 Did you ever have a</p> <p>11 conversation with Dr. Vivek regarding</p> <p>12 Adrian --</p> <p>13 A. No, it's Dr. Dhar.</p> <p>14 Q. You told us about earlier?</p> <p>15 A. Excuse me?</p> <p>16 Q. You told us about that</p> <p>17 conversation earlier, correct?</p> <p>18 A. Yes.</p> <p>19 MR. SUCKLE: I have nothing</p> <p>20 further.</p> <p>21 MR. SHAFFER: I have a few</p> <p>22 questions. It's a few.</p> <p>23 EXAMINATION MR. SHAFFER:</p> <p>24 Q. Doctor, did anybody from the</p> <p>25 NYPD, any employee of New York City</p>
<p style="text-align: right;">Page 315</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. There is nothing written down</p> <p>3 in here. "Whole medications, none;</p> <p>4 medication administered in emergency</p> <p>5 department, none; medication prescription</p> <p>6 provided on discharge, none."</p> <p>7 Q. No abdominal medication, no</p> <p>8 blood pressure medication, correct?</p> <p>9 MR. KRETZ: Objection.</p> <p>10 A. It's here, none.</p> <p>11 Q. Did you have any discussions</p> <p>12 regarding Mr. Schoolcraft with a Bruce</p> <p>13 Flanz, F-L-A-N-Z?</p> <p>14 A. No, I don't know.</p> <p>15 Q. How about conversations</p> <p>16 regarding Mr. Schoolcraft with David</p> <p>17 Rosen?</p> <p>18 A. No, I don't.</p> <p>19 Q. How about Ollie Peterson, any</p> <p>20 conversations with Ollie Peterson?</p> <p>21 A. I don't know.</p> <p>22 Q. Seth Vivek?</p> <p>23 A. Seth Vivek?</p> <p>24 Q. You answered that. Did you</p> <p>25 have any conversations with Seth Vivek</p>	<p style="text-align: right;">Page 317</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Police Department, ever tell you to keep</p> <p>3 Adrian Schoolcraft at Jamaica Hospital</p> <p>4 against his will?</p> <p>5 A. No.</p> <p>6 Q. At any time prior to Mr.</p> <p>7 Schoolcraft being released from Jamaica</p> <p>8 Hospital --</p> <p>9 MR. SHAFFER: Let me rephrase.</p> <p>10 Q. Did you believe that Mr.</p> <p>11 Schoolcraft should have been released</p> <p>12 from Jamaica Hospital earlier than he</p> <p>13 actually was?</p> <p>14 A. Earlier than when I decided he</p> <p>15 needed admission?</p> <p>16 Q. No, no. Did --</p> <p>17 MR. RADOMISLI: Objection to</p> <p>18 form. That's just improper because</p> <p>19 you don't know if she knows what</p> <p>20 happened after she saw him.</p> <p>21 Q. Do you know that Mr.</p> <p>22 Schoolcraft was released from the</p> <p>23 hospital at some point in time?</p> <p>24 A. Yes.</p> <p>25 Q. Do you know when Mr.</p>

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<p style="text-align: right;">Page 318</p> <p>1 L. ALDANA-BERNIER</p> <p>2 Schoolcraft was released in the hospital?</p> <p>3 A. Looking at the note, 2/6/2009.</p> <p>4 Q. Say again?</p> <p>5 A. February 6, 2009.</p> <p>6 Q. You mean November 6th?</p> <p>7 A. November 6, yes.</p> <p>8 Q. At any point prior to November</p> <p>9 6, 2009, did you believe that Mr.</p> <p>10 Schoolcraft should have been released</p> <p>11 from the hospital?</p> <p>12 MR. RADOMISLI: Objection.</p> <p>13 MR. LEE: Objection.</p> <p>14 A. Before 11/6?</p> <p>15 Q. Correct.</p> <p>16 MR. RADOMISLI: Objection.</p> <p>17 A. I already admitted him. I</p> <p>18 wouldn't know. He went upstairs. I</p> <p>19 would not be able to make a decision to</p> <p>20 be discharged then.</p> <p>21 Q. Doctor, what is adjustment</p> <p>22 disorder?</p> <p>23 A. Adjustment disorder is -- it's</p> <p>24 a psychiatric -- it's a diagnosis wherein</p> <p>25 someone goes under stress and will react</p>	<p style="text-align: right;">Page 320</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. That's correct.</p> <p>3 Q. And the attending physician has</p> <p>4 ultimate responsibility for the patient,</p> <p>5 correct?</p> <p>6 A. That's correct.</p> <p>7 Q. And you can direct nurses to do</p> <p>8 things for the patient, correct?</p> <p>9 A. That's correct.</p> <p>10 Q. You didn't have any issues with</p> <p>11 what any of the nurses did or did not do</p> <p>12 for the patient, correct?</p> <p>13 A. That's correct.</p> <p>14 MR. SMITH: Objection.</p> <p>15 Q. You did not have any issues of</p> <p>16 what the residents did or didn't do for</p> <p>17 this patient, correct?</p> <p>18 A. That's correct.</p> <p>19 Q. You were the attending in</p> <p>20 charge of the psychiatric ED when you</p> <p>21 were there, correct?</p> <p>22 A. That's correct.</p> <p>23 Q. That means you would have</p> <p>24 supervised the psychiatric residents in</p> <p>25 the ED?</p>
<p style="text-align: right;">Page 319</p> <p>1 L. ALDANA-BERNIER</p> <p>2 to that stress within a day to one month;</p> <p>3 react in a sense that will affect his</p> <p>4 functioning. He could either be</p> <p>5 depressed, either be agitated, or he</p> <p>6 could also -- different kinds of</p> <p>7 reactions could be manifested either</p> <p>8 through violence or opposite of violence</p> <p>9 which would be depression or could be</p> <p>10 manifested with anxiety.</p> <p>11 MR. SHAFFER: Nothing further.</p> <p>12 MR. RADOMISLI: I just have a</p> <p>13 few questions.</p> <p>14 EXAMINATION BY MR. RADOMISLI:</p> <p>15 Q. Doctor, residents operate under</p> <p>16 the supervision of attending physicians,</p> <p>17 correct?</p> <p>18 A. That's correct.</p> <p>19 Q. Decisions by residents must be</p> <p>20 approved by the attending, correct?</p> <p>21 A. That's correct.</p> <p>22 Q. Attendings can overrule</p> <p>23 decisions made by residents if they</p> <p>24 believe that the decisions were</p> <p>25 incorrect; is that right?</p>	<p style="text-align: right;">Page 321</p> <p>1 L. ALDANA-BERNIER</p> <p>2 A. Psych emergency room, yes.</p> <p>3 Q. Would that include the</p> <p>4 psychiatric residents who evaluated the</p> <p>5 patient when he was in the medical</p> <p>6 emergency room?</p> <p>7 A. In 2009, yes, it was us, the</p> <p>8 doctors in the emergency room.</p> <p>9 Q. The doctors in the psychiatric</p> <p>10 emergency room supervised the psychiatric</p> <p>11 residents who evaluated patients in the</p> <p>12 medical emergency room?</p> <p>13 A. Yes.</p> <p>14 Q. And the resident would not have</p> <p>15 authority to discharge a patient on his</p> <p>16 own, correct?</p> <p>17 A. Correct.</p> <p>18 Q. That decision would have to be</p> <p>19 made by the attending, correct?</p> <p>20 A. Correct.</p> <p>21 Q. If a patient was going to be</p> <p>22 discharged at some point from the</p> <p>23 psychiatric emergency room, an attending</p> <p>24 psychiatrist would have to make that</p> <p>25 decision, correct?</p>

<div>Page 322</div> <div><div>1L. ALDANA-BERNIER</div><div>2A. That's correct.</div><div>3Q. And you were this patient's</div><div>4attending psychiatrist, correct?</div><div>5MR. LEE: In the emergency room?</div><div>6MR. RADOMISLI: Yes.</div><div>7A. In the emergency room, depends</div><div>8what the shift is.</div><div>9Q. During your shift?</div><div>10A. During my shift, yes.</div><div>11MR. RADOMISLI: No more</div><div>12questions.</div><div>13MR. SUCKLE: I have a couple</div><div>14questions.</div><div>15FURTHER EXAMINATION BY MR. SUCKLE:</div><div>16Q. A resident, a resident can't</div><div>17discharge a patient, correct?</div><div>18A. That's correct.</div><div>19Q. And a resident can't admit a</div><div>20patient, correct?</div><div>21A. The attending has the final</div><div>22decision.</div><div>23Q. So when a resident says that a</div><div>24patient should be held, that has to be</div><div>25confirmed by an attending, correct?</div></div>	<div>Page 324</div> <div><div>1L. ALDANA-BERNIER</div><div>2A. Yes.</div><div>3Q. And for holding a patient,</div><div>4attending has to make that order too,</div><div>5correct?</div><div>6A. That's correct.</div><div>7MR. SUCKLE: Nothing further.</div><div>8MR. SMITH: It's 6:30. We are</div><div>9ending the deposition.</div><div>10MR. SUCKLE: For the record I</div><div>11want to say the attorney for Jamaica</div><div>12Hospital will be retaining the</div><div>13original Exhibit No. 69 which is the</div><div>14hospital chart.</div><div>15[TIME NOTED: 6:31 p.m.]</div><div>16</div><div>17DR. LILIAN ALDANA-BERNIER</div><div>18</div><div>19Subscribed and sworn to</div><div>20before me this _____</div><div>21day of _____, 2014.</div><div>22</div><div>23_____</div><div>24Notary Public</div><div>25</div></div>
<div>Page 323</div> <div><div>1L. ALDANA-BERNIER</div><div>2A. That's correct, yes.</div><div>3Q. So a resident can't hold a</div><div>4patient on his own or her own order,</div><div>5correct?</div><div>6A. Needs to be discussed with the</div><div>7attending.</div><div>8Q. Am I correct, a patient cannot</div><div>9be held on the order of a resident at</div><div>10Jamaica Hospital in 2009, correct?</div><div>11MR. CALLAN: She just answered</div><div>12the question.</div><div>13A. It has to be discussed with the</div><div>14attending. The attending has to make --</div><div>15they discuss that and once it's</div><div>16discussed, then the attending will make</div><div>17the decision.</div><div>18Q. Attending has to make the order</div><div>19for admission, correct?</div><div>20[Continued on the following page to include</div><div>21signature and jurat.]</div><div>22</div><div>23</div><div>24</div><div>25</div></div>	<div>Page 325</div> <div><div>1</div><div>2I N D E X</div><div>3</div><div>4WITNESS EXAMINATION BY PAGE</div><div>5L. Bernier Mr. Suckle 7, 322</div><div>6Mr. Shaffer 316</div><div>7Mr. Radomisli 319</div><div>8</div><div>9E X H I B I T S</div><div>10PLAINTIFF'S DESCRIPTION PAGE</div><div>11Exhibit 69 Chart 37</div><div>12Exhibit 70 Emergency Admission</div><div>13Status 232</div><div>14Exhibit 71 Visiting Hours 233/234</div><div>15Exhibit 72 Restriction of</div><div>16Visitors 233/234</div><div>17Exhibit 73 Use of Razors 233/234</div><div>18Exhibit 74 Psych 3 Unit Rules 233/234</div><div>19Exhibit 75 4/95 Document 233/234</div><div>20Attorneys have retained all exhibits.</div><div>21</div><div>22</div><div>23</div><div>24</div><div>25</div></div>

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1  
2 CERTIFICATION  
3  
4 I, MARGARET SCULLY-AYERS, a Notary  
5 Public for and within the State of New  
6 York, do hereby certify:  
7 That the witness whose testimony as  
8 herein set forth, was duly sworn by me;  
9 and that the within transcript is a true  
10 record of the testimony given by said  
11 witness.  
12 I further certify that I am not  
13 related to any of the parties to this  
14 action by blood or marriage, and that I  
15 am in no way interested in the outcome of  
16 this matter.  
17 IN WITNESS WHEREOF, I have hereunto  
18 set my hand this 27th day of February,  
19 2014.  
20  
21  
22 MARGARET SCULLY-AYERS  
23 \* \* \*  
24  
25

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1  
2 ERRATA SHEET  
3 VERITEXT/NEW YORK REPORTING, LLC  
4  
5 CASE NAME: Adrian Schoolcraft -v- The  
6 City of New York et al.  
7 DATE OF DEPOSITION: February 11, 2014  
8 WITNESS' NAME: Dr. Lilian Aldana-Bernier  
9  
10 PAGE/LINE(S)/ CHANGE REASON  
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21 DR. LILIAN ALDANA-BERNIER  
22  
23 SUBSCRIBED AND SWORN TO  
24 BEFORE ME THIS DAY  
25 OF \_\_\_\_\_, 2014.  
26  
27  
28 NOTARY PUBLIC  
29 MY COMMISSION EXPIRES \_\_\_\_\_

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